

GIVING VOICE TO PEOPLE LIVING WITH AND AFFECTED BY HIV

Statement by Michel Sidibe
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(UNAIDS)
Delivered on his behalf by Paul De Lay
UNAIDS Deputy Executive Director
Geneva, Switzerland
20 March 2012
19th Session of the Human Rights Council

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Thematic Panel Discussion on HIV
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Zero new HIV infections. Zero discrimination. Zero AIDS-related deaths.

Madame President, Madame High Commissioner, distinguished delegates and panellists, on behalf of my Executive Director, Michel Sidibe, I would like to thank the Brazilian Government for sponsoring last year's resolution and the Human Rights Council for agreeing to consider HIV through this innovative panel.

The High Commissioner has referred to the 30 year milestone in the AIDS response, which occurred last year. These thirty years are a microcosm of the good, the bad and the ugly of how human beings can address a major global disease threat. The good in the equation is directly related to the realization and protection of human rights in our response to AIDS. The bad is related to punitive and coercive approaches, many of which continue. And the ugly takes the form of ongoing human rights violations which further traumatize those vulnerable to HIV infection or living with HIV. Now is an appropriate time to take stock.

As the High Commissioner has eloquently said, we are in a very different place than we were thirty years ago. New infections are dropping and people infected with HIV are living long and productive lives. For the first time, we feel we actually have the tools to stop this epidemic, or as we say: *Get to zero new HIV infections, zero discrimination and zero AIDS-related deaths.*

Yet ironically, our successes are leading to complacency, when they should lead to the urgency to finally end the epidemic – even with the economic crisis that threatens the gains that have been achieved. We are at a significant turning point. Human rights have always driven the AIDS response – the rights to treatment, to non-discrimination, to participation – the rights that this Council has so firmly supported. We need human rights now more than ever to take the response to the next and, hopefully, final phase.

One major shift the world has yet to fully grasp is the ground-breaking science that has occurred over the past two years. Through randomized controlled trials, it was conclusively established that “HIV treatment equals HIV prevention”. When HIV infected people receive treatment, they are 96% less likely to infect their stable sexual partners. From a human rights perspective, there have always been strong arguments to start more people on treatment. Now with these scientific findings, there are even more reasons. Where treatment is being taken to scale, such as in Botswana, Lesotho, Namibia and Zimbabwe, we are beginning to see a significant drop in new infections. The human rights imperative now is to maintain treatment for those who have received it, and reach, by 2015, the over 8 million people still in need.

The AIDS response has created, for the last many years, an amazing global compact – a human rights compact, though it is seldom referred to in that way. High income countries have provided significant resources and science to low income countries, which in turn have dedicated political commitment and people power to roll these resources out for their people. This compact has involved, on one hand, the human right to international assistance and cooperation, and on the other hand, the human right to have one's basic needs met by one's government. In addition, the Global Fund was established as an innovative new funding mechanism that has promoted strong country leadership and ownership.

Unfortunately, this global compact and the Global Fund itself are now threatened by the current economic crisis. Resources for AIDS have dropped, and the Global Fund is underfunded. UNAIDS is doing its best to urge donors not only to not cut back, but even to increase, their funding for AIDS. We are also urging recipient countries to take bolder steps to embrace their responsibility to provide domestic funding for the health of their people. We are working to support all stakeholders to make their investments go further by being more focused, effective, efficient and results-driven.

Being more effective and efficient means targeting resources and programmes to those most vulnerable and most impacted by HIV. In many epidemics, this means: women, young people, people who use drugs, sex workers, men who have sex with men and transgender people. Women and girls continue to suffer from gender inequality and violence that put them at risk of HIV. For women living with HIV this includes denial of their sexual and reproductive rights, including forced sterilization. This is all the more tragic in a world where we can, and must, achieve the elimination of mother to child transmission in the developing world, as we have in high income countries. In many places, young people continue to have the highest infection rates and are denied the information, education and services they need to avoid HIV. Sex workers, people who use drugs, men who have sex with men are criminalized and stigmatized. They do not have access to basic services and face discrimination in the services that are provided. Forty seven countries continue to impose discriminatory restrictions on entry, stay and residence based on HIV status, even though such restrictions have no legitimate place in today's world.

These are some of our challenges, but we are hopeful. We have always asked, and depended on, this Council to ensure that inequality, violence, discrimination and criminalization do not block people's rights to access to HIV services. We need your support in addressing these obstacles now more than ever.

At the request of the Council, today's panel is to give voice to people living with and affected by HIV. I cannot pay tribute enough to the courage and commitment of these people, who have done the most to turn things around in this epidemic, in large part by demanding their human rights. They have marched, litigated and risked their lives to demand solutions from governments, science and the UN. They have challenged society to see themselves -people living with and affected by HIV - as people with rights, not as criminals; as active agents and rights-holders, not as victims. Your spirit of activism still moves us today. It holds us accountable to our human rights commitments. Largely because of this activism, it is clear that HIV is not just a virus, but a catalytic force that opens doors, dismantles barriers and clears space for greater social justice.

Harnessing this force for change is a key objective of UNAIDS and the AIDS response.

- Because of AIDS, drug patents were made accessible for the first time, using prescribed flexibilities; and a range of affordable medicines—not just ARVs—have reached poor people around the world. AIDS continues to push for the appropriate balance between critical health needs and legitimate intellectual property concerns.

- Because of AIDS, there is more local production of medicines in developing countries and the dream of regional drug regulatory agencies is now slowly becoming a reality.
- AIDS continues to shine the harsh light of public scrutiny and political justice on violence against women, including the use rape as a weapon of war, as recognized by the Security Council in Resolution 1983 on HIV which was passed last June.
- Because of AIDS, there are greater efforts to provide young people with the information on health and sexuality to which they have a right. Young people are taking control of their health. We see this in lowering infection rates among young people.
- AIDS has pushed us to treat drug dependence as a health condition, not a crime. We have been able to reduce the harms associated with drug use in places as diverse as Australia and Iran, though much more has to be done to address the needs and rights of this population.
- AIDS is pushing us to confront illegal and repressive police action against key populations at risk of HIV. Promoting acceptable police behaviour in this context supports improved rule of law for all.
- Because of AIDS, governments and communities have found pragmatic ways to reach men who have sex with men and transgender people with vital health services, while moving toward greater recognition of their human rights, so bravely supported by this Council.
- AIDS has pushed governments and communities to talk about sex work as a social reality, opening opportunities to better protect sex workers from HIV, as well as from harsh punishments and human rights abuses, particularly in a number of countries in Asia.

In conclusion, the AIDS response has been a force helping to drive the larger human rights agenda. That human rights are essential to effective and just AIDS responses was recognized in last year's High Level Meeting on HIV/AIDS where States reaffirmed that *"the full realization of all human rights and fundamental freedoms for all is an essential element in the global response to the HIV epidemic"*. AIDS has dramatically demonstrated the universality and interdependence of human rights – that we are all in this together, and the rights of the few must be protected to protect the rights of all.

UNAIDS thanks the Human Rights Council for your engagement and leadership, and asks that you keep HIV on your agenda until this epidemic is behind us.

Thank you.