

LATIN AMERICAN COALITION ON WOMEN AND AIDS

SPEECH BY DEBORAH LANDEY, DEPUTY EXECUTIVE DIRECTOR, UNAIDS

*** Check against delivery ***

First Lady of Honduras, Señora Xiomara Castro de Zelaya,

- First Lady of Surinam, Liesbeth A.M. Venetiaan-Vanendurg
- First Lady of Guatemala, Wendy Widmann Lagarde de Berger
- First Lady of El Salvador, Ana Ligia de Saca
- First Lady of Mexico, Margarita Zavala Gomez
- First Lady of the Republica Dominicana, Margarita Cedeño de Fernandez,
- A representative of Vivian Fernández de Torrijos, Panamá
- A representative of Marisa Lula da Silva, Brasil

Señorita Patricia Pérez, Dr Cristina Beato,

Excellencies, distinguished guests, friends and colleagues

It is a tremendous pleasure and honour to be here with you all today at this historic meeting of the Coalition of First Ladies and Women Leaders of Latin America. This is the first time I've visited Honduras and I am delighted to have an opportunity to visit this wonderful country.

Allow me to commend Ms Xiomara Castro de Zelaya, First Lady of Honduras for her outstanding response to AIDS both here and in the region as a whole. I am grateful to the First Lady of Honduras for her passionate commitment to make a difference to this cause. I'd also like to thank her for bringing us all together at this wonderful event.

I commend your movement, the Coalition of First Ladies and Women Leaders of Latin America, for championing gender equity and equality.

Es maravilloso ver a tantas personas de tan diversas procedencias congregadas para movilizar acciones que permitan que la respuesta ante el SIDA funcione mejor para las mujeres y niñas de América Latina.

Para eliminar las inequidades, erradicar las injusticias, desterrar el estigma. Y para acelerar el progreso al Acceso Universal a la prevención, tratamiento, cuidados y apoyo asociados al VIH –de tal manera que todas las mujeres, dondequiera que ellas vivan, puedan tener acceso a los servicios que necesitan.

“Nada por Nosotras sin Nosotras”. This was the Declaration that emerged from the First Latin American and Caribbean Conference on Women and Girls living with HIV, organized by the International Community of Women (ICW) living with HIV in October 2006.

The Coalition of First Ladies and Women Leaders has taken up that call and championed it.

In Buenos Aires in April this year, the Coalition and ICW Latina met together to forge a strategic alliance. An alliance that is firmly grounded in a shared commitment to promote and secure the rights of women – particularly women living with HIV. Only when this happens, will we be able to begin to get ahead of the AIDS epidemic in Latin America.

Let me start with some facts about the epidemic. Half all adults living with HIV worldwide are now women. In some areas, notably southern and eastern Africa, the ratio is much higher.

Here in Latin America, a vast and varied region, it is actually misleading to talk about a “Latin American epidemic”. Indeed, there are more epidemics than there are countries in the region.

Today, some 1.7 million people are living with HIV in Latin America. Last year, there were 140,000 new HIV infections in 2006, and 65,000 people died of AIDS-related illnesses.

Two-thirds of those living with HIV in the region reside in the largest countries – Argentina, Brazil, Colombia. But very severe epidemics are found in smaller countries, such as Honduras and Belize.

The good news is that there has definitely been progress in recent years. Particularly around HIV treatment. In the past four years, Honduras has gone from 0 to 5,000 people on antiretroviral treatment. We see similar patterns in other countries.

The challenge now is to eliminate the stigma and discrimination that still stop many people who need it from requesting HIV treatment. And to vastly scale up HIV prevention. Globally, there is a tremendous need to re-energise HIV prevention efforts. For every one person who starts taking ARV treatment, there are another six new infections.

We must urgently step up our focus on HIV prevention – in Latin America and throughout the world.

In this region, most HIV epidemics are concentrated in urban settings, and most occur among certain populations - sex workers and their clients, men who have sex with men, transgender, indigenous populations, and migrants.

Many of these people live on the margins of mainstream society – discriminated against, and unequal. Our collective failure to tackle deep-rooted inequalities – the low status of women and injustices against these marginalized groups - in the past, means that we are dealing with hidden and increasingly complicated epidemics. And increasingly, the partners of members of these hidden groups are becoming infected with HIV.

The majority of those partners are women – often married women – and girls – often very young girls.

This is why we are here today. To prevent these infections, and to ensure that when women and girls are infected, they can access treatment, care and support when they need it.

AIDS has been with us for 26 years now. We have waited too long to start tackling the tough issues – the inequalities and the injustices - that lie at the heart of the epidemic. Your presence here today is a clear signal to Latin America – to the world – that waiting is no longer an option. We must act now.

And there are three things we must do.

First we must demonstrate and promote strong and sustained leadership, throughout the region, to place women at the centre of the agenda. Not mainstreamed. Not sidelined. At the centre.

We also need leadership from planning and development sectors so all women have the means to keep a roof over their heads, put food on the table, and send their children to school. It is wonderful to see leaders from the labour, law and justice, women's and interior ministries here today. We need all of you put in place the policies and services that will help women do just that.

We need leadership from the health sector so all women can exercise their right to access quality sexual and reproductive health care, HIV prevention education, male and female condoms, and antiretroviral treatment when they need it.

We need leadership from law makers and law enforcers to outlaw discriminatory practices, secure women's rights and protect women from violence.

We need leadership from religious institutions, who play such a vital role in reaching out to people and providing care and support.

We need leadership from the scientific community, to prioritise development of female controlled HIV prevention methods such as microbicides, and to ensure that women are included in research trials of HIV vaccines and treatment drugs.

We need leadership from civil society – particularly women living with HIV. Time and again, all over the world, we see how real progress on AIDS happens when government leadership goes hand in hand with civil society leadership. When civil society is directly involved in designing and implementing AIDS plans. ICW Latina has shown some inspiring leadership – building links with politicians and the media.

And last but not least, we need leadership from men. Only when men stand up and speak up on women's issues, will we know that change is really happening. I'll come back to this later.

In the meantime, I call on the leaders of this region: Put women at the centre.

Second, we must make sure that everything we do passes the test for women.

At UNAIDS, we have a mantra: "Make the money work". This means making sure that AIDS funds are spent where they're needed most, on what they're needed most, for those who need them most.

If we're to make the money work properly, we must make sure it works for women and for men.

This means making sure that national AIDS plans identify and address women's issues. To have real impact, they must go beyond simply listing women as a target group for Universal Access to HIV prevention, treatment, care and support. They must go a step further – and tackle real issues: sexuality, reproductive health rights of women, violence against women, so pervasive all over the world.

It means ending condom promotion campaigns that at the same time promote aggressive male sexual behaviour. It means ensuring large-scale HIV testing programmes or male circumcision initiatives factor in the implications for women. It means making sure reproductive health services include HIV services. It means making sure that women and men have equal access to HIV treatment.

Brazil's leadership in women's access to anti-retroviral treatment is well-known all over the world. Less known, but important, is its effort to counter the vulnerability, stigma, and discrimination experienced by sex workers, men who have sex with men, and injecting drug users, so that they are not afraid to access HIV services.

There are some great examples of individual programmes working for women in Latin America.

Casa de la Mujer in Bolivia takes a truly holistic approach to women's reproductive health. The project offers not only health services, but legal services (especially for domestic violence and child support), psychological care, education. It also advocates for women's access to water and food

A condom programme for sex workers in the Dominican Republic has the sex workers themselves promoting the use of condoms among other sex workers. Sex establishment owners encourage clients to use condoms too.

But it is time to build on these initiatives – to shift the focus from short-term projects that benefit relatively few people, to large-scale long-term strategies that benefit the many.

I call on all designers and implementers of AIDS strategies to ensure that all programmes pass the test: "Does it work for women and girls?" – and to make sure women and girls get to answer the question!

Third, as I mentioned briefly a few minutes ago, we must work more closely with men. For ultimately, it is not just women who pay a high price when traditional “masculine” behaviours prevail. Men’s health and wellbeing are compromised too.

One way men can clearly make their mark is by promoting zero tolerance for violence against women.

Violence against women is one of the most dramatic manifestations of the inequalities between men and women. And there’s increasing evidence of the links between what are sometimes called the twin epidemics of violence against women and HIV.

There is evidence in South Africa and South Asia that most men agree on the need to eliminate violence against women.

And there are important lessons to be learnt from the well-known Instituto Promundo in Brazil. This programme works with boys and men to reduce violence against women by building on men’s positive behaviours and changing the negative.

So I call on the men of the world, including in this region – STOP THE VIOLENCE!

The Global Coalition for Women and AIDS, which I represent here today, was launched three years ago because we realized that most AIDS plans and programmes simply don’t work for women.

The Global Coalition on Women and AIDS has spelled out a clear agenda, which calls for:

- women’s rights
- more investment in AIDS programmes that work for women
- more seats at the tables for women.

This is an ambitious agenda. One that will need partners who will boldly push a movement within their constituencies because at the end of the day, we need to show the changes in “Laws, money, and seats at the table”.

If we can make sure this happens, we’ll have taken an important step to overcome the huge barriers stopping women from accessing HIV prevention, treatment, care and

support. And we'll be further down the road to ensuring that the women and girls of Latin America can live longer, healthier, and more productive lives.

Debemos cambiar, podemos cambiar, **VAMOS** a cambiar el curso de esta epidemia!

We must, we can, we will change the course of this epidemic.