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Excellencies, distinguished delegates, ladies and gentlemen

I am pleased to join you on behalf of the ten cosponsoring organizations that make up UNAIDS to introduce the report of the Joint United Nations Programme on HIV/AIDS over the past biennium. UNAIDS is, after all, a child of ECOSOC so I particularly value the opportunity to report back to you.

There has been some real progress since 2005. Some 2.3 million people in low and middle-income countries are now receiving anti-retroviral therapy. In many populations in East Africa, the Caribbean, and some parts of Asia, HIV infection levels are falling.

Investment in AIDS has increased steadily: this year an estimated $10 billion will be spent on tackling the epidemic in low and middle-income countries. Almost one third of this will come from low and middle-income countries. This is good progress, but still falls short of the 18 billion dollars needed to counter the epidemic effectively.

Political support has remained solid: For example, last June UN Member States reaffirmed the pledges they had made in 2001 in a new Political Declaration on HIV/AIDS. Their agreement to scale up towards universal access to HIV prevention, treatment, care, and support by 2010 has established a new momentum for both global and local AIDS responses.

Over the past two years, the UNAIDS Joint Programme has reinforced work in its five core areas.

We have accelerated and strengthened UN action at country level, and taken steps to work together more coherently at both global and national levels.

Following the 2006 Political Declaration on HIV/AIDS, one of UNAIDS’ prime tasks has been to help set national targets towards universal access. So far, 92 countries have set targets and 36 have costed and prioritized national plans. We have helped ensure those plans are implemented effectively, by encouraging different players to align around them and by operationalizing the Three Ones principles – one national AIDS strategy, one national AIDS
coordination authority, and one country-level monitoring and evaluation system. There are now 65 Joint UN Teams working on AIDS, half of which have agreed joint programmes. And this year’s external review of progress on the recommendations made by the Global Task Team on Improving AIDS Coordination Among Multilateral Institutions and International Donors indicates that, although we are at an early stage in the process, advances are being made.

We have built on our experience as a pathfinder for UN reform through the Unified Budget and Workplan, emphasizing the value of adhering to an agreed division of labour between the UNAIDS Secretariat and the ten co-sponsors.

Second, we have focused on “making the money work” for Universal Access to HIV prevention, treatment, care and support. We have intensified policy guidance on issues such as HIV prevention, human rights, and gender and enhanced provision of technical support. Five regional technical support facilities drawing on regional expertise now work to raise the level and quality of HIV technical resources and capacity available in 60 countries in Africa, Latin America, and Southeast Asia.

Third, we have scaled up efforts to harmonize and improve monitoring and evaluation activities at global and national levels, as well as strengthening our capacity to track resource flows and enhance reporting.

Fourth, we have helped mobilize financial resources for the response to AIDS in low and middle-income countries, working closely with the Global Fund for AIDS, Tuberculosis and Malaria, the World Bank, and other key multilateral donors such as the European Commission and regional development banks (African Development Fund, Inter-American Development Bank, Asian Development and Asian Development Bank) and bilateral donors.

Fifth, we have promoted civil society and leadership. Last year’s High Level Meeting on HIV/AIDS in New York saw unprecedented levels of civil society participation. Now we are focusing on ensuring similar levels of participation at district and local level.

Excellencies
UNAIDS is maturing. We are now eleven years old. But the global AIDS epidemic shows no sign of abating. Every day, 10,500 people are newly infected with HIV and 8,000 die of AIDS-related illnesses. For every person who starts taking anti-retroviral treatment, another six become infected.

We are at a new milestone in the world’s response to AIDS. We are at a point where we must acknowledge that AIDS is not just a short-term emergency, but also a long-term crisis that will require serious commitment and serious resources for decades, not years, to come.

It is time, therefore, to ensure that everything we do now contributes to an effective response that can be sustained over the longer term. This means taking a cold hard look at what we are doing, dropping what doesn’t work and consolidating and scaling up what does.

It is time to get more serious about coherence and accountability. Progress has been made, but we still have some way to go.

It is time to intensify efforts to mobilize funding. We will continue our efforts to ensure cost effectiveness, alongside initiatives to explore new sources of sustainable and longer term funding.

While we continue expanding access to HIV treatment, it is time to strengthen our prevention efforts, to work harder to tackle the fundamental drivers of the epidemic. Until we address stigma and discrimination, the low status of women, and the marginalization of people living with HIV and vulnerable groups such as sex workers, men who have sex with men, migrants, and injecting drug users, neither prevention nor treatment programmes will reach everyone who needs them.

Last, but most critically of all, we must ensure that AIDS retains its appropriate place, high on international and national political agendas. This means sustaining leadership and commitment at all levels – among politicians, business, scientists, and civil society.
I therefore welcome the Secretary-General’s pledge to the General Assembly on 21 May, that AIDS will remain a system-wide priority for the United Nations.

We look to you for continued leadership so that we can ensure the best possible UN response to AIDS – now and in the future.

Thank you very much.