

**NOW MORE THAN  
EVER: TARGETING  
ZERO HUMAN RIGHTS  
VIOLATIONS OF LESBIAN,  
GAY, BISEXUAL,  
TRANSGENDER, AND  
INTERSEX (LGBTI)  
PEOPLE IN AFRICA**

Mr Michel Sidibé, Executive Director, UNAIDS  
6 December 2013  
Cape Town, South Africa  
**African Men for Sexual Health and Rights (AMSHer)  
Pre-Conference Meeting,  
ICASA 2013**

## SPEECH

**By:** Mr Michel Sidibé, Executive Director, UNAIDS

**Date:** 6 December 2013

**Place:** Cape Town, South Africa

**Occasion:** African Men for Sexual Health and Rights (AMSHer) Pre-Conference Meeting, ICASA 2013

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**Targeting zero human rights violations of lesbian, gay, bisexual, transgender, and intersex (LGBTI) people in Africa**

## **Mourning Madiba**

My friends, we all learned yesterday with profound sadness of the passing away of President Nelson Mandela, a great South African, an African hero and a global icon who liberated his people, transformed his country and influenced the world with his vision and struggle for justice, equality and dignity.

I know Madiba would be proud that lesbian, gays, bisexual, transgender and intersex people (LGBTI) from across Africa have gathered here in Cape Town, South Africa, to call for the end of violence and discrimination.

## **Progress and challenges in the struggle for the health and rights of LGBT people**

Africa is changing! This change is visible in economics and in the increasing world interest for doing business in Africa. But the winds of change on our continent also blow on culture and society. The fact that we are all here today, calling for “zero human rights violations for LGBT people in Africa” is another illustration of this change. This change is not given. It is the fruit of the struggles and activism of many in this room and across the continent.

Since we last met in Addis Ababa ahead of the ICASA conference two years ago, we have lost friends and colleagues to violence and hatred just because they had the courage to love and stand for rights. Among these are Maurice Mjomba in Tanzania, Eric Lembembe in Cameroon and Thapelo Makutle here in South Africa. Hundreds more have been beaten, harassed and detained because of their sexual orientation and gender identity, as vividly documented in the October 2013 Report of AMSHeR. Several countries are considering the introduction of more stringent laws against homosexuality. Yet, we are here, standing for rights and calling for zero violence. This shows our common determination to challenge hatred and prejudice and work for true justice, health and dignity that leave no one behind.

## **Zero discrimination: a call to action**

When I became Executive Director of UNAIDS, I called for three zeros, including zero discrimination. I made this call in Khayelitsha, a township on the outskirts of Cape Town, where a few years earlier Mandela made a powerful plea for universal access to HIV services and for ending discrimination.

When I called for zero-discrimination, many thought I was dreaming. But today in Africa and across the world, this vision is being echoed by many constituencies, particularly the most stigmatized and marginalized in our societies. They see zero discrimination not as an option but as a struggle for their existence. This vision is alive in today’s pre-conference as you gather to build evidence, expand partnerships and seek new approaches for social, legal and programmatic change to end violence and realize access to health and other services for LGBT people in Africa.

## **HIV and LGBT people: we must do better**

The HIV epidemic on our continent has exposed the negative consequences of discrimination and prejudice towards LGBT people. The failure to respond to the health and human rights of gay men, other men who have sex with men and transgender people is costing lives and compromising our response to the HIV epidemic. Everyone in this room knows that new research shows alarming and high HIV prevalence among men who have sex with men across the continent. Fifty percent of men who have sex with men who participated in a 2008 study in Johannesburg were living with HIV. In Durban, they were 28%. In Dakar, 21% and an average 17% in Botswana, Malawi and Namibia. We are yet to measure the full scale of this epidemic among gay men, men who have sex with men and transgender people in Africa, as available studies remain limited in scope, and often restricted to main urban centres.

But we know that our response is not matching up to the scale of the needs. Men who have sex with men often have extremely limited access to condoms, water-based lubricants, HIV education and support for sexual risk reduction. A 2012 survey in 165 countries among 5000 men who have sex with men also found that they had difficulty in accessing lubricants. Funding for HIV prevention services for men who have sex with men is especially limited in North Africa and across sub-Saharan Africa with less than 3 million dollars having been spent annually between 2007 and 2012. Punitive legal environments, lack of confidence among men who have sex with men in health care system, and low priority among policymakers for the health and rights of LGBT people are among the key reasons for this situation. This is not tenable! We must change this reality.

The existence and work of AMSHeR, its 18 constituent organisations and of all those working on HIV and human rights for LGBT people are reminders that progress is possible. Your work is building the momentum for change. Our increased knowledge on the HIV epidemic among gay men and men who have sex with men in Africa gives us a powerful opportunity to mobilise and move forward in our quest for health, dignity and justice for LGBT people.

In May 2013, UNAIDS convened a policy and strategy consultation with LGBT people and HIV activists and organisations from around the world to talk about these issues. Recommendations emerged on four key areas:

1. A reliable evidence base to drive policy and programming;
2. Non-discriminatory health systems that deliver broad services to expand treatment;
3. Political leadership and renewed activism to achieve equal health and rights; and
4. Rights-affirming investment models that benefit everyone.

## **Way forward and UNAIDS' commitment**

These are building blocks for change, justice and health, and they require that we intensify our work on three key areas:

- First, we must increase the visibility of local efforts to give face, voice and strength to LGBT people on the continent. The build-up of an LGBT and HIV movement in Africa with its own identity is obvious and it must continue to debunk the myth that being gay is

“un-African”. Keep pushing forward in your advocacy. As Nelson Mandela said, “When the water starts boiling, it is foolish to turn off the heat”.

- Secondly, LGBT people and their issues should be at the centre of national HIV responses. And funding must be available to support the programmes that address the health and rights of LGBT people. The Global Fund’s new funding model offers great potential for this and we all need to engage with this process to make the money work for LGBT people. Whether it is money from the Global Fund or from national or international sources, we must fund the programmes that save lives.
- Finally, we must promote and support leadership in all sectors of society. True transformation is when we have demand from below met with effective leadership at the top. We are seeing signs of political leadership in some countries, including Malawi and Kenya. But we need more leaders speaking out on human rights. And this leadership is not just in government; we need more leaders for tolerance from religion, sport, and music.

You can count on me to ensure UNAIDS is a key ally in this quest for change. Ending discrimination, violence and improving access to HIV and other health services for LGBT people is a UNAIDS priority. I will keep speaking out for the health and human rights of LGBT people. It is so urgent in the AIDS response. I have instructed all UNAIDS Country Offices to work with LGBT organisations and with national governments to identify concrete political and programmatic steps that address the HIV and health needs of gay men, other men who have sex with men and transgender people.

### **Continuing the journey for dignity and justice**

My friends, making the HIV response work for gay men, other men who have sex with men and transgender people requires social, cultural and legal change. This is what will make the vision of zero new HIV infections, zero discrimination and violence and zero AIDS-related deaths a reality for LGBT people.

Achieving this vision will not be easy. But throughout the response to HIV, we have proved that change is possible, particularly on this continent. Our greatest tribute to Madiba is to continue this journey for justice and dignity together, and to create the new Africa we want in our lifetime.

Thank you.

[END]

### **UNAIDS**

The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners to maximize results for the AIDS response. Learn more at [unaids.org](http://unaids.org) and connect with us on Facebook and Twitter.