

WINNIE BYANYIMA

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UNAIDS EXECUTIVE DIRECTOR REMARKS

ECOSOC MANAGEMENT SEGMENT

Agenda item 12 (h) Joint United Nations Programme on HIV/AIDS

22 July 2021

Your Excellency Ambassador Akram, President of the ECOSOC,
Your Excellency Ambassador Kelapile, Vice-President of the ECOSOC,
Your Excellency Dr Shangula, Minister of Health and Social Services of
Namibia and the Chair of the UNAIDS Programme Coordinating Board,
Excellencies, Distinguished delegates, I am honoured to present my first
report to ECOSOC as the Executive Director of the Joint United Nations
Programme on HIV/AIDS.

Defining moment in the AIDS pandemic

This year marks 40 years since the first cases of AIDS were reported. Since then, we have lost nearly 35 million people to AIDS. This continues to be one of the deadliest pandemics of our times. 37.7 million people are living with HIV. Tremendous progress has been made—27.5 million people have access to ARVs and are living health lives. However another 10.2 million people are waiting for life-saving treatment and we have work to do. Overall, progress towards ending AIDS has been uneven among and within countries. Last year, there were 1.5 million new HIV infections and 680,000 AIDS-related deaths. Yet, we have the knowledge and tools to prevent every single new HIV infection and avoid every AIDS-related death.

But inequalities—including gender and racial inequalities —, stigma and discrimination, punitive laws and the denial of people’s human rights, drive new HIV infections and prevent people from accessing the HIV services they need. The impact of inequalities and discrimination on the epidemic is very clear, for example, in sub-Saharan Africa, six in seven new HIV infections among adolescents between the ages 15 and 19 years are among girls. Sub-Saharan Africa remains the epicentre of the AIDS epidemic with 40% of all new infections. In sub-Saharan Africa, adolescent girls and young women account for 25% of all new HIV infections despite representing just 10% of the population. Every week, 4200 young women aged between 15 and 24 are infected with HIV. Globally, 65 percent - of all new HIV infections now occur among key populations and their sexual partners.

A word on COVID. We are seeing new waves of COVID-19 in sub-Saharan Africa which is home to two thirds of people living with HIV.

Countries with the highest HIV prevalence also have the lowest COVID vaccination coverage. Vaccines are not arriving fast enough, and COVID-19 is overwhelming health systems including HIV prevention and treatment services. We now know that people living with HIV are at higher risk of severe COVID-19 illness and death. This is a crisis in Africa- a crisis for people living with HIV or at risk.

UNAIDS Joint Programme leading the global efforts to end AIDS

Let me now turn to the joint United Nations response to AIDS. I thank this Council for its foresight and out of the box thinking when it created this unique multi-sectoral programme in the mid-nineties. Thank you for insisting on including people living with HIV and those most at risk of HIV infection at the centre of the UN's global response, as well as in the governance of the Programme through the NGO Delegation. This is a unique feature of the Joint Programme. The UNAIDS Joint Programme has led global efforts to respond to AIDS. We have leveraged the expertise of the Secretariat and the 11 cosponsors to keep HIV on national and global political agendas. We have supported countries to implement evidence- and rights-based, gender-responsive and multisectoral responses to AIDS.

UNAIDS support to countries is catalytic in nature. The Joint Programme core budget of USD 187 million in 2020 represented less than one percent of the total resources of 21.5 billion US dollars invested in the AIDS response in low- and middle-income countries last year. During the past 18 months, the UNAIDS Joint Programme has responded rapidly to the challenges posed by the COVID-19 pandemic. We have worked closely with governments and communities, as well as with the Global Fund and PEPFAR, to ensure access to HIV services for all those who need them. With the Joint Programme support, new insights and innovations have emerged to strengthen national HIV responses in this context of covid.

As described in my report, UNAIDS is continuously refining its operating model and ways of working to increase efficiency, coordination, collaboration and coherence. We now have a new Global AIDS Strategy which was adopted by the UNAIDS Programme Coordinating Board in

March this year, and an ambitious new Political Declaration, adopted just over a month ago at the High-Level Meeting of the United Nations General Assembly here in New York. The momentum generated by these milestones inspires and reinvigorates our work going forward.

We will work hard to support countries to achieve the 2025 targets, as a pre-requisite for delivering on the SDG commitment to end AIDS by 2030. We will also continue our efforts to support countries to monitor and collect data. This is crucial for an evidence-based response. We will mobilize partners nationally, regionally and globally, and across sectors, to build momentum and to ensure that the HIV response is fully funded. We will step up our efforts to end the inequalities that are preventing some groups from accessing services.

Twenty-five years of the Joint Programme

This year marks 25 years since UNAIDS started its operations as a unique, joint and cosponsored United Nations programme. I am delighted to celebrate these 25 years with you here, at the ECOSOC, where the Joint Programme was conceptualized and established. The multisectoral joint programme model, governed by an inclusive Board that includes people most affected by HIV as its members – remains more relevant than ever. This is also recognized in the resolution you will be adopting today. Allow me to thank the PCB Chair and Vice-Chair, Namibia and Thailand, for skilfully facilitating negotiations on the resolution in Geneva, and all member states for reviving the spirit of consensus and common purpose which has always characterized the AIDS response and the work of UNAIDS. Together we will end inequalities and end AIDS.

Thank you.

