REMARKS

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THE GLOBAL ALLIANCE
TO END AIDS IN CHILDREN

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A secretariat, comprising UNAIDS, WHO and UNICEF will support these structures and ensure consistent and clear communication between the different working parts of the Alliance.
I would like to begin by acknowledging that the land on which we gather is the traditional and unceded territory of the Mohawk (Kanien'keh:ka) people, a place which has long served as a site of meeting and exchange amongst nations.

We are grateful for the opportunity to meet on this territory and commit to the pursuit of truth, reconciliation, and allyship.

Friends, I am delighted to welcome you to this symposium. This is the kick start of our “Global Alliance to end AIDS in children by 2030: Building partnerships, communities and innovation”.

We have seen successes, with 12 countries in sub-Saharan Africa reaching the target of 95% ART coverage in pregnant women last year. Success. And Botswana being the first high prevalence African country to be validated on the path to eliminating vertical transmission of HIV. That’s success.

However, globally, we are far from ending new HIV infections in children.

Almost half of the world’s 1.7 million children living with HIV last year were not benefiting from antiretroviral therapy. You have to compare this with 75% of all adults living with HIV who are on antiretroviral therapy. That is a huge gap.

Over 70% of these 1.7 million children are in 10 African countries. That makes ending HIV in children an achievable goal. If those ten countries could act, we would solve almost three-quarters of the problem.

And every hour 11 children under the age of 15 are dying from AIDS. That is one child, one precious life every 5 and a half minutes. This is a tragic moral outrage.

We are also far from ensuring quality care for women living with HIV, and progress in preventing vertical transmission has flat-lined in some high-burden countries.

All of this is unacceptable. All of this is avoidable. And we should not accept it! And that is why we are here today. I am so happy that this room is almost full.

Thank you for coming.

Nine countries have already joined this alliance: Côte d’Ivoire, Democratic Republic of Congo, Kenya, Mozambique, Nigeria, South Africa, Tanzania, Zambia and Zimbabwe.
Everyone in this room and joining us online knows what needs to be done, the commodities and tools are available to us. Now we come together to renew political commitment to demonstrate that we can end this horrible inequality.

Our new Global AIDS Strategy in 2021 and last year’s Political Declaration made by member states at the General Assembly provide an opportunity to direct our attention and redouble our efforts to end AIDS in children. It provides us with a roadmap. We must learn also from past initiatives such as the Global Plan Towards the Elimination of New HIV Infections among Children by 2015, Keeping Their Mothers Alive, and Start Free Stay Free AIDS Free. Those are initiatives that also achieved success and that we learn from and build on.

We are here today to renew our commitment to our children. Strong leadership at the country level, in designing, planning, and implementing, supported by strong partnerships. That is the way we have achieved progress in the past, that is the way we will reach where we need to be.

And I am here to commit. To commit for the Joint United Nations Programme on HIV/AIDS. Children are our top priority. I am pleased to share that the Committee of Co-sponsoring Organizations, that is the 11 UN agencies that cosponsor the Joint Programme, has endorsed the Alliance as a global strategic initiative. We are giving it priority.

I welcome and recognize our distinguished speakers, leaders in this alliance: my colleague, Catherine Russell, of UNICEF; Dr Tedros, my colleague, Director General of the WHO; Angeli Achrekar, my colleague from PEPFAR; Marijke Wijnroks, my colleague and Chief of Staff at The Global Fund; Monsignor Robert Vitillo, Secretary General of the International Catholic Migration Commission; my friend Chip Lyons, President and CEO of the Elizabeth Glaser Pediatric AIDS Foundation; and Ms Lilian Mworeko, Head of the International Community of Women Living with HIV Eastern Africa. My thanks also to Dr Morenike Alex-Okoh, Director Public Health, Federal Ministry of Health Nigeria

My special thanks and gratitude go to civil society leaders and community leaders who are instrumental and are the guiding force in the co-creation of and in implementing our Alliance plan.

Together we can end AIDS in children by 2030. This is achievable. It is not only achievable, it is our moral duty, and we will do it.

Thank you.