

AS WRITTEN



UNAIDS
UNICEF • UNDP • UNFPA
UNESCO • WHO • WORLD BANK

Joint United Nations Programme on HIV/AIDS

To be checked against delivery

**21st Special Session of the United Nations
General Assembly for the Review and Appraisal of
the Implementation of the Programme of Action
of the International Conference on Population and
Development**

New York, 1 July 1999

Statement

by

**Peter Piot
Executive Director**

I am pleased to deliver this statement on behalf of the Joint United Nations Programme on HIV/AIDS, also known as UNAIDS.

When the International Conference on Population and Development (ICPD) was held in 1994, there was recognition that the threat of AIDS needed to be effectively addressed in the Programme of Action. And yet, I cannot say with confidence that those of us who were there were fully aware of the range and depth of the impact of this epidemic, which would call for far more intensified efforts than were being planned.

The inception of the Joint United Nations Programme on HIV/AIDS (UNAIDS) in 1996, two years after Cairo, came from a recognition that HIV needed to be seen as a development issue, demanding diverse resources and expertise. With our Cosponsors, UNICEF, UNDP, UNFPA, UNDCP, UNESCO, WHO and the World Bank, we are proud to be associated to further the Programme of Action of the ICPD and to ensure that concerns related to AIDS receive due attention in its implementation.

What has been the change since the ICPD in terms of AIDS and what does that mean for the implementation of its Programme of Action?

These have been five years of expansion of the AIDS epidemic, but also five years of progress in our response to AIDS.

But together with progress in an increasing number of countries, there is news so devastating that few in this room could have predicted or imagined it even five years ago.

Today, over 33 million people are living with HIV in the world. 16,000 people become infected with HIV every single day including 5 young people every minute. Much of the epidemic is still invisible, as the overwhelming majority of those infected do not know their HIV status. In just the last three years, over 30 countries have seen their HIV infection rates more than double. In Asia, a doubling of infections has occurred in almost every country. In several countries in Eastern Europe, the increase has been six-fold and more.

Today, in Botswana, Zimbabwe, Namibia and Swaziland, one out of four adults are infected with HIV.

In South Africa, 3 million people are living with HIV. In India, over 4 million.

Last year, AIDS killed more people than malaria.

So, notwithstanding our progress, we continue to confront an epidemic which in many parts of the world is out of control, and is wiping out the development gains that so many have worked so hard to achieve over many decades. It is clear now that because of AIDS, goals set in the various UN conferences will not be reached.

Not only is this a terrible human tragedy, it also represents a staggering blow for development. The biggest reversal already evident is in life expectancy, which, due to AIDS, is projected to decrease by 15-20 years in the most seriously affected countries. Hand in hand with this will be a steep rise in orphanhood and child-headed households. AIDS is also causing significant increases in infant and child mortality in high prevalence countries.

At the same time, AIDS creates and deepens poverty. A study in one seriously affected country showed that in urban households where the breadwinner has AIDS, family income has been cut by two-thirds, with an over 50% drop in schooling. What does this imply for our poverty eradication and 'school for all' goals? Indeed, what does it imply for the future development of nations when children are being withdrawn from school? What does it mean when every single day several teachers die from AIDS?

Ladies and Gentlemen:

With millions of lives hanging in the balance, with the development gains of the past decade at stake, governments – north and south – must do much more through their policies and programmes to support communities, families and individuals as they wrestle with this epidemic.

First, and above all, political commitment up to the highest level, to confront this epidemic is needed. It is the most essential as tough political decisions are required within it comes to issues such as sex and life skills education for youngsters.

Second, only an inclusive approach can work for such a complex problem, with broad partnerships between various governments sectors, between governments and communities, and between those infected and those not. This implies that from now on the response to the HIV epidemic becomes part of the national development agenda.

Third, we need to break the silence around this epidemic. How can we ever win this battle without openness about sexuality and about AIDS? This requires at the same time an uncompromising fight against the stigma and discrimination associated with HIV.

Fourth, the resources going to HIV prevention are highly inadequate. We estimated that in 1997 only about US\$ 160 million were spent on HIV prevention in sub-Saharan Africa. This is far below what is required to stop the epidemic.

Fifth, we must use our resources for approaches and interventions that work. We have learned that there is no single magic bullet for prevention, and that a mix of approaches and interventions is needed.

Sixth, we must invest much more in programmes for the one billion young people between 15 and 24 years, as 50% of all new infections worldwide come from this age group. I am very pleased that the proposed ICPD future actions text now includes a goal to reduce HIV infection among young people. Based on successful experiences in countries on all continents, I am confident that the target for 25% reductions in HIV prevalence among young people, as set forth in the proposals for future actions, is achievable. Young women will require particular attention, since they are now being infected at a much faster rate than young men. In some countries, HIV levels in teenage girls exceed those in teenage boys by five **times** or more and most of these girls were infected by older men.

Finally, in the face of a true development crisis in sub-Saharan Africa, a significant intensification of our collective efforts is required through a true emergency-type response. This calls for a broad international partnership against AIDS, involving governments, international development agencies, non-governmental organizations and the corporate sector.

Ladies and gentlemen, to conclude. Today we can look back to the Cairo meeting and see much progress, and many areas for optimism. But there is

one very big dark cloud, and that is AIDS. Yet we have learned that nations are not powerless under that cloud – that with the right combination of strategies, technical know-how, and a strong measure of political will, communities can face up to the virus in their midst and decrease the danger it poses to this and future generations.

Let us make a commitment to ourselves and each other that we will have the courage of our convictions to stand with the facts and against the politics of division when the lives of our young people hang in the balance.
