



Address to the World Health Assembly

Geneva, 17 May 2001

Speech by

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Thank you, Secretary General for your leadership and having set out such a clear agenda. Thank you Dr Brundtland for your leadership, for having put health on the broader political agenda - the fact that the Secretary General speaks here is a clear indication of that. And thank you for strengthening WHO as part of UNAIDS.

Next month, on 5 June, it will be 20 years since the Centers for Disease Control of the USA carried a brief report of a new disease killing young homosexual men. This was the first formal report of what we have come to know as AIDS. In this short period, 60 million people have become infected with HIV - the size of a country like the UK.

I will never forget that day in 1983 when I revisited the large Mama Yemo Hospital in Kinshasa - then Zaire - a hospital I had known during the Ebola outbreak in 1976. When I saw the large numbers of emaciated young men and women, I instantly realised that the world would face a major new epidemic - one driven by sex. But I don't think any of us all these years ago, even in our worst fears could have imagined the scale of the epidemic that has unfolded.

This is another tale of globalisation, one of the rapid global spreads of a mainly sexually transmitted virus, one of global inequities in health, and one of the need for a truly global response and solution.

The brief history of AIDS is also one of evolving understanding, of a shifts in paradigms - from a medical curiosity to a complex health issue with major development, political and human security dimensions. Today consensus is growing around a new paradigm, one integrating prevention and care, and addressing both risk and vulnerability reduction.

It is difficult to speak positively about this devastating epidemic, but out of its destruction and waste, I believe that something new and positive is beginning to grow. Our behaviour is changing, not just personally, but institutionally. AIDS is

challenging us to act differently, to provide a truly global solution with new flows of global resources.

As you heard from the Secretary General, we now do have a clear agenda, which will be at the centre of our deliberation at the UNGASS. It is an ambitious agenda, which also captures the complexity of the response, based on experience and solid evidence.

As we all know, there is a huge unfinished agenda ahead of us. But the truth it has taken the longest to learn is that half-measures will not succeed against this epidemic.

To achieve success, business as usual simply will not work. Let us not fool ourselves - AIDS is here to stay for many years, if not for generations. Therefore we have to embark on emergency type action, while at the same time building capacity for the long term. Defeating AIDS requires sustained behaviour change, from every individual, every institution and within every relationship.

The UN system is a powerful lever for change - not only because it is an important institution in its own right, but also because it carries the moral legitimacy of nations acting collectively out of their collective, mutual interest in building a better future.

The leadership of the UN system in the global response to AIDS is therefore one of the most powerful weapons we have. Under the UNAIDS umbrella we now have an unprecedented single UN system strategy against AIDS, and all agencies are now beefing up their AIDS work, as is WHO. The fact that you, Secretary-General, have made the fight against AIDS a personal priority, carries enormous significance in both practical and symbolic terms. There is no one else on the planet who can carry your moral legitimacy - and power to open doors - including the doors to bank vaults!

The UNAIDS Cosponsors and Secretariat stand ready to work with all partners to make the global AIDS and Health Fund a reality, and a success for the benefit of people.

Over the last year, we have seen a sea change in the international response to AIDS, and the debate in Committee A today is an illustration of this. For the first time in the history of this epidemic we have the opportunity to turn the tide on a truly large scale - the scale that matches the extent of the epidemic. The stars are moving into the right configurations: we know what works, there is a strategy, there is political commitment, resources are coming, the stars that are missing are the ones with the vaccine and microbicides, and the one with the all out effort against the stigma associated with AIDS.

Translating today's political commitment into tomorrow's success should now be our priority. This sea change in the response to AIDS provides us also with a historic opportunity to put on the top political agendas, and engage all sectors. Therefore Multisectoral approach to AIDS is a great opportunity for the health sector, rather than a threat.

Finally, I would like us all to agree on one more thing: AIDS is a problem with a solution. If we don't believe this, we have no chance to win. And if I didn't believe this, I wouldn't be in this job. So, let's make sure that at the UNGASS in New York we turn the doom and gloom of AIDS into a message of hope, and one of fighting back.