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Opening session: The Global Fund's Role as a Strategic and Responsible Investor in HIV/AIDS

I want to thank the Chair and the Vice-Chair of the Board for their excellent leadership in charting the course for this important session.

Let me say from the outset of my opening remarks that if our hope is to put AIDS into the history books—we must take bolder action.

Most important is preventing new infections. As long as there are five people newly infected for every two people starting HIV treatment—we will not change the trajectory of the epidemic.

Preventing infections means, in economic terms, we will avoid future costs. In human terms—preventing infections means that tremendous suffering will be averted.

We also need to catalyze a new movement. We need to unite the almost four million people on treatment to become agents of change—for a new, dignified approach to prevention, treatment, care and support.

In this time of crisis, today's topic—investing strategically and responsibly—is needed now more than ever.

What does that mean for the Fund and the global response to AIDS? Allow me to share five issues.

Number 1: Ensure country owned programmes and strategies

We need to urgently put into practice the principle of country owned programmes and strategies. The Global Fund's move towards national strategy applications should be supported and accelerated.

All programmes need to be costed, informed by evidence, prioritized by actual country needs and always grounded in human rights. Donors must harmonize and align with national systems and processes.

Number 2 - Invest For Results

Let us ask—are we investing our resources in areas that provide maximum return?

Last year's Asia Commission report on AIDS showed that almost 90% of all investments went into areas with insufficient returns.¹

Where countries are lagging behind—what are we doing to accelerate progress?

We must adopt and invest more in the best tools available to forecast future financial resource needs for individual countries. We need to work with national leaders to assess options and tradeoffs.

We must use emerging evidence to maximize the benefits of different combinations of prevention services, ART treatment modalities and combinations of treatment.

We need to improve the architecture for public-private partnerships to transfer resources, more rapidly and transparently to the community level, and reduce the unit cost of producing any results by improving quality.

Number 3 - Reaching people in the most need

As a "strategic" investor the Global Fund must allocate its resources knowing that not everything can be done. Difficult choices must be made based on actions that will save the most lives. Let us put special emphasis towards vulnerable people in poor countries.

How can we ensure that people at the margin of society can access life-saving treatment and prevention services? Here I am talking about areas where social protection and health systems are the weakest or even non-existent. For example, less than half of injecting drug users have access to HIV prevention services.²

Number 4 - We need bolder goals.

We need to ensure that people living with HIV do not die of TB. In 2007 there were half a million deaths from co-infection. TB accounted for a quarter of all AIDS deaths.³

We need to remove punitive laws, practices, and stigma and discrimination from blocking effective responses to AIDS.

The AIDS response is an opportunity to tackle laws that have tried to criminalize homosexuality as we have been supporting parliamentarians to pass positive laws in Africa. Or promote laws in China that protect drug users from criminalization.

And of particular relevance today, we can prevent mothers from dying and babies from becoming infected with HIV. In all of Western Europe there were fewer than 100 mother-to-child transmission cases in 2007, while in sub-Saharan Africa there were more than 300,000.⁴

Today I am calling for the virtual elimination of mother-to-child transmission by 2015. This is a moral imperative.

I know WHO, UNICEF and UNFPA are already working to help us get there.

These are just a few of the goals in the new UNAIDS *Outcome Framework*.⁵ But we all need to work together to ensure that these goals are achieved.

Number 5 - We need integrated services

We must push for the integration of services to accelerate progress in AIDS and strengthen synergies with the other Millennium Development Goals.

- What is stopping us from fully integrating TB and HIV services in countries with high prevalence?
- How can we use mother-and-child care services to also offer HIV testing and counselling as well as sexual and reproductive health services?
- How do we scale-up combination prevention to save lives?

This means that we need to take AIDS out of isolation. AIDS must be our bridge to make progress on the larger health and development goals. What we need is an AIDS Plus / MDG vision.

Universal access

Let me finish by saying that Universal access is not just a 'slogan'—it is a movement to reach the unreachable. It is our race against time to save lives, restore dignity to people, and return ownership to countries.

The Global Fund is a key partner in the global movement to achieve universal access. That is why I am always advocating for a fully funded Global Fund.

Our discussion today will focus on the Global Fund in its role of an intelligent investor. Even if the Global Fund thinks with its head—it must act with its heart. In the end, AIDS is all about people, families, and communities.

Thank you.

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UNAIDS is an innovative joint venture of the United Nations, bringing together the efforts and resources of the UNAIDS Secretariat and ten UN system organizations in the AIDS response. The Secretariat headquarters is in Geneva, Switzerland—with staff on the ground in more than 80 countries. Coherent action on AIDS by the UN system is coordinated in countries through UN theme groups, and joint programmes on AIDS. UNAIDS' Cosponsors include UNHCR, UNICEF, WFP,

UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. Visit the UNAIDS Web site at www.unaids.org

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