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REGIONAL COMMITTEE FOR AFRICA

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ADDRESS BY HIS EXCELLENCY MR FESTUS MOGAE, THE FORMER PRESIDENT OF THE REPUBLIC OF BOTSWANA AND CHAIRPERSON OF THE CHAMPIONS FOR HIV-FREE GENERATION

Your Excellency, Mr Paul Kagame, the President of the Republic of Rwanda, Honorable Ministers of Health,
Director-General of WHO, Dr Margaret Chan,
WHO Regional Director for Africa, Dr Luis Gomes Sambo,
Excellencies, Members of the Diplomatic Corps,
Distinguished Guests and Participants,
Ladies and Gentlemen,

I am delighted for this opportunity to address this very important forum which makes decisions related to our health in this Region. I wish to express my gratitude to the WHO Regional Director for Africa, Dr Luis Gomes Sambo, for inviting me. I also thank you, Mr President Kagame, and your Government for hosting this meeting.

This is indeed a privilege because it gives me the opportunity to share my thoughts and experiences about the fight against the HIV/AIDS epidemic in the Region, and also learn from your diverse expertise on this complex disease that continues to wreak havoc on our people in sub-Saharan Africa.

Let me take this opportunity to congratulate Member States for the increasing commitment to improving the health of our people in general, and tackling the HIV/AIDS epidemic in particular.

As you are all aware, sub-Saharan Africa continues to bear a disproportionate HIV/AIDS burden. More than 22 million people in our Region are living with HIV, more than one million of whom acquired the infection in the last year alone, and we lost up to 1.5 million to this disease. In the process, 11.6 million children were left without one parent or both of their parents. This makes them very vulnerable to disease and exploitation. These are not just numbers but real people and the repercussions on our continent are dreadful.

However, there has been progress across the continent in the fight against AIDS even though this has not been uniform. While countries have developed and adopted different intervention programmes and strategies, there is still an urgent need for combined efforts involving African leaders in the battle against HIV and AIDS. African leaders should accept that AIDS is a serious leadership challenge and they should not shy away but get involved.

Allow me to share with you one of the initiatives launched last year to broaden the battle against HIV and AIDS by involving Africa's top leadership. I am speaking to you as Chairperson of a group known as the *Champions for an HIV-Free Generation*. This is a group of former African Presidents and other renowned African personalities.

We came together for the purpose of calling on African leaders to revitalize and step up efforts to prevent the spread of HIV. This initiative was first announced in August 2008 during the 17th International AIDS Conference in Mexico City. We launched it in Gaborone, September 2008.

These champions are Dr Kenneth Kaunda, former President of Zambia, Mr Joaquim Chissano, former President of Mozambique and Mr Benjamin Mkapa, former President of Tanzania.

Others are Archbishop Emeritus and Nobel Laureate Desmond Tutu, Justice Edwin Cameron of the South African Constitutional Court, Professor Miriam Were who is Chairperson of the Kenya National AIDS Control Council and the Africa Medical and Research Foundation, Ms Liya Kebede, an Ethiopian supermodel based in New York who is WHO Goodwill Ambassador, Dr Speciosa Wandira, former Vice-president of Uganda, and Ms Joyce Mhaville, Chairperson of the Steering Committee of the African Broadcast Media Partnership against HIV and AIDS.

Our mission is to lend authority and experience to promote best practice interventions with an emphasis on prevention. We advocate for stronger and outspoken leadership in our Region, mobilization of the international community and work with strategic partner organizations in Africa that mobilize and inform high-level leadership. In addition, we champion the social changes needed to achieve the vision of an HIV and AIDS-free generation.

In our campaign we target sitting Heads of State and Government as our focal target audience. Our secondary targets are ministers, members of parliament, leaders of civil society, religious and faith-based organizations, People Living with AIDS leadership, traditional leaders and the media.

Since this group was inaugurated in September 2008 in Gaborone, we have participated in the 15th International Conference on AIDS and Sexually Transmitted Infections in Africa which was successfully held in Dakar, Senegal, in December 2008.

The inauguration of the group in Gaborone was a brainstorming exercise because we were meeting for the first time as the Champions for an HIV-Free Generation. This was the first opportunity for us to map out our strategies for implementing our mandate. This is included in our approach to country visits to consult with the political leadership and other stakeholders in the fight against HIV and AIDS.

Our meeting in Gaborone also gave us the opportunity to be briefed by the National AIDS Coordinating Agency on Botswana's intervention programmes and strategies. The story of how Botswana responded to this problem is well known. Today, nearly 90 per cent of those needing treatment are receiving anti-retroviral medicines free of charge. Mortality has been reduced to 10 per cent of those living with the virus and Mother-to-Child infections have dropped to four per cent. We have also expanded HIV testing and counseling.

The Champions' country visits started this year. We visited Mozambique and Namibia as part of our mission of mobilizing the leadership. During these visits, we met with the top leaders and many 'Champions' who work hard every day in this struggle against HIV and AIDS.

We were well received by the Presidents of the two countries, President Armando Guebuza of Mozambique and President Hifikepunye Pohamba of Namibia and their ministers. Our discussions with all the people that we met were frank and well focused. We had the opportunity to witness the significant progress which made us even more committed to work towards an HIV-free generation. We regard our mission as a calling to save the masses of Africa.

In both Namibia and Mozambique, the Champions emphasized four key issues based on consultations with in-country partners. These issues included male circumcision, multiple concurrent sexual partnerships, gender, stigma and discrimination, and adequate funding of anti-AIDS initiatives in the broader context of health systems strengthening.

Male circumcision is one of the priority areas for the Champions because we believe in the evidence that it helps to reduce the chances of HIV transmission in heterosexual men by as much as 65 per cent. We recommend that it should be introduced as part of a comprehensive prevention strategy that includes correct and consistent use of condoms and faithfulness to one partner.

We emphasized the point that male circumcision, if implemented, could prevent an estimated two million infections in the Southern African region over the next 10 years and would save as many as four million lives over the next two decades. We came out of Mozambique satisfied that the country's political leadership was committed to the fight against HIV and AIDS. We will continue to monitor to ensure that there is no lapse in that commitment.

In both countries, the Champions also emphasized other issues also based on consultations with government and the in-country partners. These issues included leadership of the HIV response; prevention strategy; sustainability of the response; and stigma and discrimination.

We commended the Namibia Government on the remarkable progress made in the response to HIV, including the quick roll-out for people living with the virus and the Prevention of Mother-to-Child Transmission (PMTCT) programme.

We noted with satisfaction Namibia's removal of the travel restrictions on people living with HIV from entering Namibia. One form of discrimination that worried the Champions and for which we appealed for Government intervention was the denying of home loans to people living with HIV.

Like in Mozambique, we also saw in Namibia a leadership commitment to leading the fight against HIV and AIDS. In one of the meetings we had, there were twelve Cabinet Ministers and that was pleasing indeed. In addition to meeting with Government leaders and civil society the Champions also met with the founding father of the nation, former President Sam Nujoma.

Our experience with Mozambique and Namibia showed that some African leaders were not only doing something to save their people, but were willing to listen to advice. It is my hope that we will get the same attention when we visit other Southern African countries and others beyond the subregion.

I am therefore appealing to country leaders at all levels and from various segments of the population to join us and champion the fight against HIV/AIDS and HIV prevention in particular. I am also urging the populations in the African Region and health development partners to reduce their efforts especially in the area of HIV prevention.

We should all be champions if we are to win this war. As I have said before, prevention of new infections should be our priority number one, number two and number three. This calls for us to redouble our efforts both as leaders and as individuals.

At this stage, let me take this opportunity to congratulate President Paul Kagame, for the exemplary leadership you have shown in tackling the HIV/AIDS scourge in Rwanda. The achievements are there for all to see. With your leadership, we will win the fight.

Unless we address key drivers which continue to fuel the new infections such as stigmatization, and discrimination against most-as-risk populations, we will not be able to stop this epidemic. This requires us to put in place an enabling political environment and adequate laws that protect these specific groups and allow them to access proven HIV interventions.

In Southern Africa, issues that have been identified as key drivers of the epidemic include high population mobility, inequalities in wealth, cultural factors, gender inequalities, male attitudes and behaviours, intergenerational sex, gender and sexual violence, stigma, lack of openness and untreated sexually-transmitted infections and, above all, multiple concurrent sexual partners by men and women coupled with inconsistent use of condoms and alcohol abuse.

We need to address traditional norms on sexual behaviours such as widow inheritance. We need to expose such practices including multiple concurrent sexual partners, intergenerational sex and make them socially unacceptable.

We also need to expose violence against women, sexual coercion and cultures that disempower women as unacceptable and harmful to Africa. I believe traditional leaders have a significant role to play here. They need to be more involved through appropriate measures in order to reduce the drivers of the epidemic.

Let me conclude by appealing to you as important stakeholders to assist us in mobilizing the African top leadership to lead the battle against HIV and AIDS from the front.

Many of you are well-positioned in your countries to mobilize your top leadership to personally get involved instead of relegating the struggle to civil society and lower ranks of the top leadership at all levels to lead the war against AIDS.

By working together we will be able to succeed and have an HIV-free generation. I wish you a successful meeting.

I thank you for your attention.