

Permanent Mission of St. Kitts and Nevis to the United Nations

STATEMENT

ON BEHALF OF THE CARIBBEAN COMMUNITY (CARICOM)

AT THE HIGH-LEVEL MEETING ON THE COMPREHENSIVE REVIEW OF THE PROGRESS ACHIEVED IN REALIZING THE DECLARATION OF COMMITMENT ON HIV/AIDS AND THE POLITICAL DECLARATION ON HIV/AIDS

BY

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2011 High Level Meeting on AIDS

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Remarks by

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and

CARICOM Lead Head for Human Resource Development, Health and HIV and AIDS

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I speak to you on behalf of the Member States of the Caribbean Community in my capacity as the CARICOM Lead Head for Human Resource Development, Health and HIV and AIDS. I also speak to you on behalf of that wider Caribbean constituency, the Pan Caribbean Partnership against HIV and AIDS, which I have the honour to chair.

Ten years ago when countries gathered here in New York for the UNGASS on HIV and AIDS, it was amid great uncertainty about how and what had to be done to stem the tide of this pernicious disease; a disease that seemed to strike the death knell for those infected and the anguish of those affected. That conference resolved and took bold steps including the establishment of what is now termed the Global Fund for HIV and AIDS TB and Malaria. In ten years collective action and an increasing level of shared responsibility have given hope that "better must come" to people living with HIV and AIDS. Through the dedicated work of natural and behavioural scientists, philanthropists and NGOs as well as the leadership at the national and global level, great strides have been made. Scientific research has produced medicines, in particular the generics to aid care and treatment. The application of behavior change through social marketing interventions, has contributed in no small measure to arresting the spread of HIV,

reducing the number of deaths, from HIV and AIDS and increasing awareness of prevention policies. In so doing there is the growing realization of the need for inclusiveness, aimed at the eradication of HIV related stigma and at enabling equitable access to HIV related information and services, especially for the most at risk populations

The membership of CARICOM and PANCAP has always played a very active role in this global process for an accelerated approach to HIV. It is no doubt in our self-interest to find solutions, since we still remain the region second only to Sub Saharan Africa, with the highest prevalence rate. Nevertheless, the Caribbean holds out the prospect of being among the first group of countries in the world to achieve universal access. It is worth reminding this august body that it was the Caribbean Community that reacted immediately to the 2001 UNGASS Declaration of Commitment. Just two weeks after, on July 2, 2001 at its Conference of Heads of Government, through the Nassau Declaration, it enunciated that the health of the region is the wealth of the region. It identified the Pan Caribbean Partnership against HIV and AIDS as one of the main pillars and aligned its actionable recommendations to that of the outcomes of the UNGASS Declaration of Commitment. The other pillar, the Caribbean Cooperation in Health is a broad framework that outlines major priorities in public health including HIV as one of its action areas. In this context the most recent initiative, the establishment of the Caribbean Public Health Agency, through the consolidation of 5 regional health institutions, is the ultimate manifestation of the Nassau Declaration. This consolidation may yet act as a catalyst for the realization of both universal access and the achievement of the health and HIV and AIDS indicators of the Millennium Development Goals by the 2015 target date.

The UNAIDS score card on universal access 2010 demonstrates that much progress has been made in the Caribbean. Over the ten-year period since the first UNGASS, the prevalence rate has stabilized at 1 percent overall with significant variations among respective countries. New HIV infections have declined by 14 percent. AIDS related deaths from HIV and AIDS have also declined by 43 percent. The Caribbean was the first Region in the world to submit all UNGASS national reports within the stipulated.

Efforts to reduce stigma and discrimination have intensified. These programmes target the formal education sector, youth, the workplace, the faith based organizations, among others. The engagement of our universities, other regional institutions, NGOs and media, has also provided the impetus to the accelerated approach to HIV and AIDS. In this regard as we meet today, there is much to celebrate.

Yet for us in the Caribbean the warning signals prevail. An estimated 17 000 persons became newly infected with HIV in 2009. Indications are that transmission rates among key populations, such as men who have sex with men are increasing. In addition unprotected sex between men and women—especially sex work—is believed to be the main mode of HIV transmission making the Caribbean the only region, besides sub-Saharan Africa, where women and girls outnumber men and boys among people living with HIV. In 2009, an estimated 53% of people with HIV were female. High infection levels have been found among female sex workers, including 4% in the Dominican Republic, 9% in Jamaica, and 27% in Guyana. Consequently, most countries in the region have targeted these groups for HIV prevention.

We in the Caribbean have come to recognize that while progress has been made, the gains will be fragile unless innovative and bold steps are taken toward an HIV-free generation. Hence, we join in the chorus at this Assembly for a big push at all levels towards achieving universal access to HIV prevention, treatment care and support. We support the Secretary General's Global Report Recommendations for a focus on prevention, revitalizing the push for universal access, aiming at value for investments, through enhancing access to essential medicines and maximizing efficiency in non-drug related costs. In this regard, particular attention must be paid to women and girls with emphasis on reversing harmful gender norms. In the final analysis, ambitious national targets must be set and emphasis placed on achieving accountability standards.

The Outcome Document from this High Level Meeting will set laudable targets for the future, but these will not be achieved unless the Assembly also endorses a global compact based on shared responsibility, creative and collective leadership, broad

national ownership, innovative use of technology, engaging communities including through increased use of social media to develop local and sustainable solutions.

We in the Caribbean believe that emphasis must also be placed on securing long term and sustainable financing without which reversal of the marginal gains over the past ten years is inevitable. We in the Caribbean support the need for replenishments to the Global Fund to be maintained and increased. We also support the need to harmonise donor resources to reduce the administrative burdens. We will continue to advocate for the revision in the conditionalities that impose increased burdens on small economies designated as "middle" income countries without taking account of their vulnerabilities. We, however, will equally support the call for proper financial management of resources and policies that ensure the People living with HIV are placed at the centre of our concerns.

We commend the Global Plan of the UNAIDS Global Task Team (chaired by Michel Sidibe and Ambassador Goosby) for the elimination of new HIV infections among children by 2015 and keeping their mothers alive. The recommendations in this plan strike at the heart of the movement that makes "elimination" a standard refrain. Let us take our cues from this positive approach. We in the Caribbean at our 10th Annual General Meeting, of the Pan Caribbean Partnership (PANCAP) in St. Maarten, in November 2010 identified specific deliverables for our Region by 2015: elimination of mother to child transmission; elimination of travel restrictions for people living with HIV, an 80 percent increase in access to treatment, 50 percent reduction in infections, and acceleration of the agenda to address prevention, care and treatment. These are all aligned to the Millennium Development Goals, for which the 2015 deadline must act as an incentive. This global partnership must work collectively to achieve the targets that we all support in the interest of humanity, those living with the disease and those yet to be born.