

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

### STATEMENT BY HIS EXCELLENCY DR. DENZIL L. DOUGLAS

### PRIME MINISTER OF ST. KITTS AND NEVIS

### AND

CHAIR OF THE PAN CARIBBEAN PARTNERSHIP AGAINST HIV/AIDS (PANCAP)

# ON BEHALF OF THE CARIBBEAN COMMUNITY (CARICOM)

AT THE HIGH-LEVEL PLENARY MEETING ON HIV/AIDS

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PLEASE CHECK AGAINST DELIVERY

Thank you Mr. Chairman.

It is my privilege to address this gathering on behalf of the Caribbean Community (CARICOM) and the Pan Caribbean Partnership Against HIV/AIDS, the regional network that embraces Governments, Non-Governmental Organizations, international and regional agencies, business, labour, civil society and representatives of people living with HIV/AIDS, across the English, Spanish, Dutch and French Caribbean.

I do so with a mixed sense of pride and humility. My pride stems from the fact that we have established in our part of the world a coordinating mechanism that is based on a broad partnership of all those actors in HIV/AIDS. I am also proud that the stimulus for this partnership came from the decision of the Heads of Government just after the 2001 UN General Assembly Special Session on HIV/AIDS, and that it represents the proper approach to this multi-faceted problem of AIDS. I am also proud of what we have achieved to date. Spurred on as we have been by the evidence of the gravity of the problem in our Region, we established in several countries programmes that have demonstrable successes: success in extending treatment to many who need; success in reducing mortality; success in the reduction of mother-to-child transmission of the disease.

But at the same time, I am humbled by the magnitude of the task before us if we are to return to this forum in 2010 and declare that no man, woman or child is denied access to prevention, treatment, care and support, for that is our understanding of universal access. We have decided that to achieve this, we must first establish exactly what will be the indicators at regional and national levels of having reached that goal. And we will not be reticent about admitting if in some areas we fall short, which I firmly believe we will not.

But Mr. Chairman, optimistic as I am about achieving universal access, I have to be frank about some of the obstacles that may impede our quest and our programmes.

There are many needs: the need for sustained financing; the need for increased human resource capacity, given the high rates of migration of skilled labour from our region to the developed world; the need to mobilize technical and financial resources that allow greater emphasis to be placed on prevention; the need to strengthen not only our health systems, but also our education system and other social systems necessary for a comprehensive and integrated approach.

To achieve this, our international partners must be encouraged to harmonise and align programmes and to simplify funding requirements. In this regard, the intractable eligibility criteria imposed by multilateral and bilateral agencies, which disqualifies medium-income countries of the Caribbean from access to front line awards, must be challenged.

## **Identifying a Supporting Environment**

At the same time, the Caribbean is pleased with the decisions of The Monterrey Consensus and Development Assistance Committee (DAC) of the countries of the Organisation of Economic Cooperation and Development (OECD), which have established standards and criteria for alignment and harmonisation. We unhesitatingly support the UNAIDS "Three Ones" Principles, the recommendations of the Global Task Team (GTT) on improving AIDS Coordination among Multilateral Institutions and International Donors; the Rome Declaration on Harmonisation; and the G8 leaders pledge to increase Official Development Assistance (ODA) to approximately US\$50 billion a year by 2010.

We are happy that these global initiatives have been captured in the draft Political Declaration because they accord with the way we in the Caribbean see the role of our developing partners.

### Why is the Caribbean an important point of reference?

The Caribbean region is a complex mosaic of 29 countries and overseas territories with an estimated population of 38 million, characterised by tremendous diversity in size, geography, population, culture, development, language, religion, ethnicity and governance structure. HIV prevalence is second highest only to Sub-Saharan Africa. There is a great deal of concern in the region over the overall expansion and feminisation of the epidemic. A total of 300,000 persons are currently living with HIV in the region including 30,000 people who became infected in 2005. The prevalence rate in women 15-24 years is two to six times higher than men of similar age group. The Caribbean total death toll due to AIDS since the start of the epidemic is estimated between 350,000 and 590,000 claiming an estimated 24,000 lives in 2005 alone. Among young people 15-44 years, AIDS is the leading cause of death. Since February 2004, there has been more than a 50% increase in the number of people living with HIV/AIDS on treatment. However, access to HIV-treatment drugs remains unequal across the region.

### What are our goals?

By 2010 we would have reaped the benefits of a harmonized international partnership.

By 2010 our health and social systems will form the basis of an improved and integrated network of services for prevention, diagnosis, treatment, care and support.

By 2010, we hope that every country in the Caribbean would have introduced supportive legislation and a policy framework to protect the vulnerable populations, in particular men who have sex with men, commercial sex workers and prisoners. But we will also, place emphasis on the particular needs of the disabled and children, for they too are vulnerable.

By 2010 we plan to show the world that every Caribbean woman, man and child has access to relevant information, knowledge and support services by which to take preventive action.

By 2010 we would have organized our regimes for care, treatment and support.

By 2010, the Caribbean would have drastically reduced the spread of this disease through universal access.

These Mr. Chairman, ladies and gentlemen, are our goals.

In this season of World Cup soccer, you will understand when I say we must score. We must win

I thank you.