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Statement by
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Mr. President,

I would like to thank you on behalf The International Federation of Red Cross and Red Crescent Societies (IFRC) for giving us the opportunity to address this high level meeting.

Since the onset of HIV pandemic the IFRC has been supporting government’s efforts in addressing the challenges posed by HIV and AIDS. IFRC’s efforts have been focused on implementing comprehensive HIV programmes at community and household levels through empowering and involving community members.

Main areas of actions include: empowering people with pertinent information on prevention, providing support and care at household level through home-based care programmes, promoting adherence to antiretroviral therapy and tuberculosis treatments, implementing harm reduction programmes for injecting drug users, reduction of stigma and discrimination, providing psychosocial support to children orphaned by AIDS and advocacy on and promotion of human rights for people infected and affected by HIV. In the last decade, the IFRC through its programmes has managed to reach over 100 million people with pertinent information on prevention, provided psychosocial support including promotion of adherence to antiretroviral therapy and Tuberculosis treatments for 500,000 people living with HIV and comprehensive support for one million orphans and vulnerable children.

In the past three decades, the global efforts have registered remarkable achievements in terms of improving the quality of life of people living with HIV (PLHIV) through expansion of antiretroviral therapy reaching over 6.5 millions PLHIV. Similarly the programmes aimed at curbing the spread of HIV are also delivering encouraging results. However, we are still required to do more because many millions of PLHIV are still waiting for antiretroviral therapy, the prevalence of HIV infection is still quite high and in some countries is in fact on the increase, our efforts in reaching key population are very limited, stigma, discrimination and violation of human rights are still rampant and psychosocial support for children orphaned by AIDS is still not widely available.
Mr. President,

We know from available epidemiological facts that HIV is also spreading among populations in rural settings. Our collective work so far is more focused in urban areas. In developing countries the great majority of the populations are living in rural areas where the health system and other basic infrastructure are scarce or none existent. We think that our concerted efforts must also be directed to population living in rural settings too and at community health system strengthening.

IFRC's strategy for the coming decade, Strategy 2020, focuses on saving lives and changing minds. Changing mindsets requires education and advocacy and we are determined to work closely with governments and the civil society in promoting country-and people owned responses.

The Red Cross Red Crescent National Societies work with millions of volunteers globally and has the potential to expand community-based actions. However, we are seriously limited with resources. We call upon all Governments and donors to help us to scale up our comprehensive HIV programmes and reach populations in urban and rural settings in general, and the most vulnerable in particular.

We can meet the challenges posed by the pandemic. But to do so, we will need coordinated efforts, strong political leadership, the courage to confront sensitive issues, and a multisectoral response which links efforts across government and civil society.

In charting the future course of the global AIDS response, governments in the north and south, donors and all potential partners must make a firm commitment to do more, do better and reach further for the eventual victory over this devastating pandemic. The IFRC will do all possible to unfold all its potential to support the efforts of governments.

Thank you.