



THE WHITE HOUSE FORUM OF FAITH LEADERS - STATEMENT BY ANNE-BIRGITTE ALBRECHTSEN DEPUTY EXECUTIVE DIRECTOR – MANAGEMENT -- OF THE UNITED NATIONS POPULATION FUND

RELIGIOUS LEADERSHIP AND RESPONDING TO HIV AS A HUMAN RIGHTS AND SUSTAINABLE DEVELOPMENT PRIORITY

May I first thank the organisers of this momentous meeting for hosting and organizing it. I note especially the White House Office of Faith Based and Neighborhood Partnerships, the Ecumenical Advocacy Alliance (EAA), the American Jewish World Service (AJWS), the Balm in Gilead and the Global Network of People Living with HIV (GNP+).

On behalf of UNFPA, the United Nations Population Fund, I add my voice to welcome this august gathering. I am delighted to see the distinguished religious leaders – men and women, young and young at heart, and so many fellow partners on the journey to eradicate an epidemic that touches millions of lives worldwide.

As many of you know from experience, UNFPA has a long relationship with Religious Leaders and Faith-Based Organizations (FBOs). We understand and identify with the people and the values each of you represent. We see our work with communities of faith as part of our commitment, within the United Nations system, to human rights and dignity, sustainable human development and peace and security.

In fact, as we speak, my colleagues in UNFPA, UNAIDS and other development partners, are meeting with many of you, to roll out a global Initiative of Joint Learning such that we have an evidence base on the impact of local faith communities in furthering sustainable human development. This Initiative is a critical step to inform all decision makers at national, regional and global levels of the policies we must endeavour to have and to be held accountable to.

Distinguished leaders, partners and fellow activists on the journey to turn the tide on HIV and AIDS, we all know that the HIV epidemic is at a pivotal moment.

The tremendous scale up of HIV programmes has halted and begun to reverse the spread of HIV. The number of people accessing lifesaving antiretroviral treatment rose by 20% in just one year (2010-2011) resulting in more than 8 million of those living with HIV in low- and middle-income countries receiving treatment.

There is real progress towards achieving universal access to HIV prevention, treatment, care and support. Investments in HIV have had ripple effects in other areas of health care, including maternal and child health, and helped to strengthen the larger health systems in many countries.

There is a sense of hope and the renewed optimism that a change in direction is possible. In this defining moment – as with the legacy many of you bring to the lives of the people whom you serve in unique and ways - *you are critical agents of change.*

By acting decisively on recent scientific advances that have changed the landscape of the epidemic and by pursuing the momentum for an HIV vaccine and cure, we can turn the tide together on HIV and begin the march toward the end of AIDS.

I want to stress the important relationship between faith and the struggle against HIV and AIDS...

For most of the world's people, faith is an important part of their lives. Shared values across the different systems of belief bring people together rather than keep them apart. You leaders assembled here represent these shared values – faith, compassion, and support for the whole human family. You teach the world how to “see the divine in the other,” to respect the dignity, value and worth of every human being. In an increasingly atomised and individualistic world, you are the defenders of families, communities and cultures.

But as you know, ignorance, prejudice and corruption can assume the mantle of religion. Unscrupulous people can pervert even the divine message of faith, hope and love. They suppress accurate information and whip up stigma, discrimination and violence.

In such an atmosphere, many of the most vulnerable people, especially women, fear other people's judgement, and avoid invitations to come forward for testing and counselling. The stigma of HIV and AIDS moves them out of reach of the services they need. HIV-positive women for example cannot access therapy in pregnancy that could prevent transmission of infection from mother to child. So the suffering and stigma of infection are handed down from one generation to the next.

The influence of FBOs can be decisive in extending the mantle of care to cover the most vulnerable. You lead people towards the light. You raise your voices against prejudice and discrimination and you educate the uninformed. Most important of all perhaps, FBO's and Religious Leaders welcome and reassure; you reach out and

comfort; you provide essential services unavailable by other means; you bring fearful, excluded and stigmatized people into the community, with protection, treatment and care.

In very real terms, faith-based organizations in many countries deliver 30% and sometimes (especially in humanitarian and conflict contexts) up to 70% of basic health services. They work in and with the community; they reach where governments cannot. I understand that more than 16,000 health centres on the African continent are operated by Catholic organizations alone. And right here in the United States, we know that faith-inspired institutions and religious leaders play a pivotal role in the treatment, care and support of people living with HIV.

Recent scientific advances provide dramatic proof that past investments are paying off and that increased investments now can reap tremendous rewards. Yet, at this moment of extraordinary scientific progress and potential, the global response to AIDS faces crippling financial challenges that threaten both past and future progress. Abandoning these efforts now will roll back our successes to date and set the stage for years of continued crisis.

So you will forgive me if I speak frankly, because sometimes frank speaking is necessary *among those engaged collectively towards a necessary just cause*. The plain fact is that funders who perceive that dogma holds back our collective work will find other places for scarce resources. Some FBO spokespeople have appeared to deny the clear evidence of good research and even basic science in regard to HIV and AIDS.

There is a perception that among all faith communities there is a restrictive approach to condom promotion and distribution, a reluctance to work with men who have sex with men, sex workers and their clients, or intravenous drug users. These perceptions are unlikely to evoke support amongst precisely those who choose to spend increasingly meagre resources on the most vulnerable.

Yet, we know full well that FBOs are doing vital and too often unrecognised work. So we want to seek your wisdom: What can we do to help demonstrate your unique capacity to deliver HIV and AIDS information and services? What can we do to highlight their range and quality? How can we make sure that your ethical positions are better understood at all levels? How can we shine the light of truth on your messages of faith, hope and compassion?

Allow me to propose five key areas of what could be elements of our shared collaborative agenda to turn the tide on HIV and AIDS:

- 1. Work for the empowerment of women.** Women and girls, in all parts of the world, have particular needs for HIV prevention, treatment, care and support. We should acknowledge women's equal capacity to learn, to work and to make decisions affecting their lives and the lives of their families. Women and men are partners in the family, in school and in the workplace and should be recognised as such. We should work for better information, education and services directed to women and girls, including HIV prevention information and protection against mother-to-child transmission. There must be zero tolerance for violence against women and girls, in any form, in any context – not at home, nor in school, nor in health facilities, nor in the workplace. Research from South Africa shows that women who experience abuse and violence from their partners are 50% more likely to acquire HIV infection. *As leaders you exercise enormous influence among the male members of your congregations – I hope you can agree to use your influence to change men's minds and actions.*
- 2. Eradicate stigma and discrimination** towards people living with HIV, in whatever form it appears. Let me share with you an extraordinary finding from research in Asian countries: up to 90% of married women testing positive for HIV tell researchers that they have had no sex partner other than their husband. Yet it is routine for families and communities to stigmatise HIV-positive women on the grounds of their infidelity. When the husbands die of AIDS, the wives are blamed for infecting them. *Your leadership is essential, not only to speak out firmly and consistently against such examples of prejudice and discrimination, but to promote accurate information and advocate for behaviour change.*
- 3.** In that regard, we should promote *informed, evidence-based, culturally sensitive and age-appropriate education about HIV and AIDS*, how infection is transmitted and what to do to prevent infection. It is time we recognise that HIV is transmitted overwhelmingly by unprotected sexual contact, including between sex workers and their clients, between men who have sex with men, and people who use intravenous drugs. *Once more your leadership, your frank recognition of the realities, will be the spur to action.*
- 4.** We must agree **not to play the blame game.** Pointing fingers and making moral judgements will not roll back the epidemic. Nor will putting people in gaol. The evidence is that criminalizing these behaviours does not work. All these people are members of our communities – they are someone's son, father, husband, brother, sister. *We need a comprehensive and compassionate approach to HIV*

prevention; an approach based on the world as it is, and aspiring to what we wish it to be, especially for the most vulnerable amongst us.

5. Finally, I hope we can agree to recognize and **work with other partners**, and not to disparage or undermine them: our aim should be to build compassionate and collaborative partnerships with everyone involved in our struggle: people of other faiths; civil society and non-religious NGOs, especially women's organizations; organizations representing and working with people living with HIV and AIDS and *all* those at high risk.

Our task is to give a voice to the voiceless and power to the powerless. So I call upon you to please consider making a gift to the world ...

- *To mobilize communities of faith to roll back HIV and AIDS;*
- *To speak and act on behalf of compassion, tolerance and inclusion and endeavour to safeguard the spaces for many stakeholders to mobilize, sustain and consolidate these efforts;*
- *To create a culture of gender empowerment, and zero tolerance of violence against women and girls.*

I hope this meeting will catalyse and continue efforts for this great work, and enable us to meet next when we can say we *did* turn the tide against AIDS.

Thank you