CHECK AGAINST DELIVERY



STATEMENT

\mathbf{BY}

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The United Nations High-Level Meeting on AIDS
Implementation of the Declaration of Commitment on HIV/AIDS
and the Political Declaration on HIV/AIDS Under the Theme:
United for Universal Access: Towards Zero New Infections, Zero
Discrimination and Zero AIDS- related Deaths

JUNE 8 – 10, 2011

Mr. President of the 65th General Assembly

Mr. Secretary General of the United Nations

Excellencies, Distinguished Heads of Delegations

The Executive director of UNAIDS

Ladies and Gentlemen:

I bring warm personal greetings from the President of the Republic of Liberia, Her Excellency Ellen Johnson Sirleaf, the government and people of Liberia to you distinguished leaders of member states of the United Nations. I thank the organizers of this important High Level meeting, devoted to the comprehensive review of the progress achieved in realizing the 2001 Declaration of Commitment on HIV and AIDS and the 2006 Political Declaration on HIV and AIDS.

This meeting is taking place at a crucial time. In just under four years (by 2015), the world community will be taking stock of our individual and collective efforts to attain the Millennium Development Goals (MDGs). Of particular relevance to today's gathering is Goal 6 of the MDGs, which reflects our collective ambition to halt and begin to reverse the spread of HIV and AIDS by 2015. It is opportune that we assess the impact of our efforts to accelerate the national and international response to HIV and AIDS, and dedicate ourselves anew to surmount any obstacles to the achievement of this goal.

Our aspiration in Liberia, in responding to the HIV and AIDS epidemic, is to create an HIV and AIDS free society, and thereby contribute to creating a global community of societies free of HIV and AIDS. Each of our countries faces the challenge of HIV and AIDS, some more acute than others. Our collective vision of a world free from the scourge of HIV and AIDS brings us all together to provide the leadership needed to defeat this global pandemic.

The global battle against HIV and AIDS is a major challenge for us all. Recognizing the magnitude of this battle, Liberia has launched a new phase of our HIV prevention program which targets young people aged 15-24 years. At the same time, we will retain the high focus on the needs of women who continue to bear a disproportionate burden of the disease in Liberia and globally.

Mr. President, at the end of 2011 Liberia will complete the implementation of its first post-war development Agenda – The Poverty Reduction Strategy (PRS) – simply branded 'LIFT LIBERIA'. Through the PRS – Liberia is accelerating

the process of recovery and development after more than 14 years of civil conflict. Under the PRS, HIV and AIDS was mainstreamed into each of the four pillars, and therefore reflects the shared responsibilities of all Ministries and Agencies.

From an historical perspective, the first case of AIDS was diagnosed in Liberia 1986. In response, the Government of Liberia created the National HIV/AIDS/STI Control Program, also known as NACP. In 1987, a National AIDS Commission was established. These programs fell apart in 1990, due to the civil crisis. Today, I am pleased to report that since 2007, the NACP has been expanded and restructured, and the National AIDS Commission was similarly reconstituted in June 2007 under the leadership of President Sirleaf who personally chairs the Commission. These progressive measures enabled the government of Liberia to expand treatment services to all 15 counties in Liberia. Additionally, our reconstituted AIDS Authority developed a new national strategy, guided by the "three ones" principle of UNAIDS: one national AIDS Authority, one national strategic framework, and one national monitoring and evaluation system.

Data collection to determine the prevalence of HIV in Liberia has also been intensified. Information is now available on HIV prevalence from both the 2007 Demographic and Health Survey and three ante-natal sentinel surveillance surveys carried out from 2006 – 2008.

The findings from both the Liberia Demographic Health Survey (LDHS) and the Ante-natal Clinic Survey (ANC) show that Liberia's epidemic - like many countries in sub-Saharan Africa has a feminine face. In 2007, surveys showed a national HIV prevalence of 1.5% among the general population; with women constituting 1.8% and men 1.2%, out of a total population of 3.5 million. And in 2008 also, the ante-natal surveillance data showed more women were infected, with a prevalence of 4.0%.

Women and girls constitute 58% of the 36,000 people living with HIV in Liberia. Differences in HIV prevalence between women and men are particularly striking in the younger age groups, with women three times higher than men in the 15-24 years age group.

Mr. President, given its small size and population, Liberia cannot ignore the impact that this pandemic has on national efforts to achieve social and economic recovery and development. It also believes that this disease presents a very serious challenge to our human development goals and, therefore supports the Secretary General's report which recommends zero new infections-zero Discrimination-zero AIDS Related Deaths. This is why Liberia fully endorses the recommendation of the Secretary General's report and affirms our commitment to work towards achieving the three zeros.

ACHEVEMENTS TO DATE:

The Government of Liberia is proud of the modest gains in its AIDS response over the past years made possible through strong partnership with multilateral and bilateral donors. And here, I would like to make special mention of the unwavering support which has been provided by the Global Fund to Fight AIDS, Malaria, and Tuberculosis. This support was simply indispensable! My government therefore joins others in appealing to donors to replenish the Global Fund in order to advance work towards achieving the three zeros.

Allow me to share a few of the gains made in our AIDS response. They include:-

- Developed a Monitoring and Evaluation Plan which has specific Gender indicators
- Through our strengthened national response to HIV and AIDS we have enrolled 8,467 persons into Care and on Treatment for opportunist infections (OIs)
- 42 percent of 10,028 persons needing treatment placed on anti-retroviral therapy...
- Increased testing and counseling services to expected mothers by expanding PMTCT services from 29 to 162 which represents national coverage of 34 percent and reached 19,366 mothers who now know their HIV status.
- We have established and initiated implementation of an Action Framework document on Women, Girls, Gender Equality and HIV and AIDS
- Strengthened the National Network of Persons Living with HIV and AIDS (PLHIV) to support prevention and treatment efforts.

Way Forward

Mr. President

Despite these gains, many challenges lie ahead of us. We must scale up our prevention programs in order to get to zero infection among youth, women and girls; expand access to treatment to enroll more people into care and reduce the impact on orphans and other children made vulnerable by AIDS.

Mr. President:

Liberia is resolved to fight HIV and AIDS. To succeed, we must maintain an environment of peace and stability and also address poverty, illiteracy, promote consistently the rights of women and girls, improve our health care system and respond to the other important goals expressed in the MDGs.

We extend thanks to the Member States of the United Nations for the investments made in Liberia through <u>UNMIL</u>, and the UN Agencies. We are also grateful for the resources provided by the Global Fund to Fight AIDS, Malaria and Tuberculosis. The peace we now enjoy in Liberia gives us the opportunity to intensify our national response to AIDS.

We will continue to count on the leadership of each of you and your governments, to help us sustain the gains Liberia has made, and to confront and overcome the threat that HIV and AIDS poses to our aspirations for national development. Clearly, we face a daunting challenge and everyone remains a responsible partner in the global fight against the disease. It takes commitment, the right strategy and collective effort of all to achieve this goal.

There is no better time than now when our collective efforts are most needed in the global battle against HIV and AIDS.

Mr. President I THANK YOU ALL for your Attention!