

**2007 HIV/AIDS Implementers' Meeting:
Closing Sessions
PEPFAR, The Global Fund to Fight AIDS, Tuberculosis and
Malaria, UNAIDS, UNICEF, The World Bank, WHO, GNP+
June 19, 2007**

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

[START RECORDING]

AMBASSADOR MARK DYBUL: Good morning. On behalf of the co-sponsors, UNAIDS, The Global Fund to Fight Aids, Tuberculosis and Malaria, The World Health Organization, UNICEF, The World Bank, and most importantly, our senior advisors, GNP+, who have provided the heart and soul of the conference, which is people living with HIV/AIDS, as we just saw with Mary Fisher, unfortunately can't be here, and many others, we would all like to thank from the depths of our heart the government of Rwanda, His Excellency Paul Kagame, Madame Kagame, Minister of Health, Honorable Minister Ntawukuliryayo, who is the chair of this meeting. I'm his co-chair. We thank deeply the government and people of Rwanda for their hospitality, warmth, and most importantly, as we've said, for your leadership in HIV/AIDS. It's been a tremendous week. We've learned a great deal. I would just say that we, as the co-sponsors, again wanted to come to Rwanda because of the theme, scaling up through partnerships. Rwanda has demonstrated the power of partnerships from the leadership of the government with the international partners and with civil society, people living with HIV/AIDS, faith and community based organizations. It's been a tremendous meeting. Many lessons learned and shared. We look forward

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

to continuing after this meeting to learn from each other and to learn from the experiences that we gathered here.

DR. INNOCENT NYARUHIRIRA: Thank you Mark. [Foreign language].

MARK SCHLACHTER: Thank you, sir. As before, ladies and gentlemen, one question apiece please, and let's keep them very short. The dignitaries do not have much time with us, so let's begin. Who would like to start? There's a question in the back, Amani.

FEMALE SPEAKER: [Foreign language]

MALE SPEAKER 2: Do we want to translate that?

[Inaudible]

DR. INNOCENT NYARUHIRIRA: [Foreign language]

MARK SCHLACHTER: Very good. Next question please. Let's take one up here. Amani?

MALE SPEAKER 3: Thank you very much, Minister. I'm Juja Kelisa [misspelled?] from the [inaudible]. From the morning session, we learned that a [inaudible] of people living with HIV/AIDS, especially the women, helps them to live longer and also those who are not living with HIV, who are not infected when they are empowered in terms of economy, they can easily prevent acquiring HIV/AIDS. So, your ministry, are there some practical strategies you've laid

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

down to make sure that the vulnerable group, the mothers, are empowered economically? Thank you very much.

DR. INNOCENT NYARUHIRIRA: Thank you. We had a network of women living with HIV. We learned that we have to empower them, yes. We are doing it, we are going to emphasize on that aspect. But first you talk to your daughter. Because this vulnerable woman has been first a baby girl. This we learned that. So let's move all together. It is not a business of the ministry. It is a business of all of ours. And this we learned from this panel, the global alliance of people living with HIV/AIDS. It is not a business of politicians. It is all of us who have to work on that.

MARK SCHLACHTER: Francoise, would you like to comment?

FRANCOISE: Good morning. I was extremely touched and proud and it brought to me again what Rwanda has done in this matter. I went to see the exhibitions and a lot of the stores are held by associations of people living with HIV, and I met with every single woman there, and they all said you should hear the pride in their voices when they talk about, when they present to you the things that they do. And they tell you that when they get up in the morning they have a purpose. And every single one of them told me that at the

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

beginning of the epidemic, they used to go and get Rwanda's equivalent of welfare here, I'm not very familiar with the terms. And it was good. It was keeping them alive. But somehow, the feeling of being a victim who needs to be helped takes away from your self-worth. And ever since they've had access from the government schemes of micro credit, you should see the way these women stride and the way they - because we've always said, you can take the best medication out there. The best ARVS. You can be followed by five doctors. If your psyche is not in order, if you do not feel [foreign language]. I've lost friends to AIDS who were on the same medication that I am, but simply because they weren't psychologically feeling strong or supported or whatever, they simply gave up. This is something that I'm going to take home with me. To see that the women here, I've only met the women, but the women here feel, they feel a very important part of society, a critical part of society. They feel they are having an impact. They're playing a role in their lives, in the decisions affecting their lives. They're getting up, their taking decisions, they're seeing the results of what they do, and again, it was such a joy to see. I looked at them, and I said, oh, these are my people. This is my family, you know? Again, I take the opportunity to

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

say, I am so, so proud to be Rwandese. You are such an inspiration. Thank you.

MICHEL SIDIBE: I think it's a very important question. I can just say I was privileged myself to be visiting a project called Avega. You know probably about this project. And I think this was really about empowerment. Empowerment economically women who have been victimized by the genocide. Widows coming together and trying really to transform their life but also contributing to really transform the life of people who are around them. And we saw younger girls who have been going through trauma, rape, and coming out and trying to be positive people, to link really themselves to others to prevent them to go through the same situation they've been going through. So I think really we have good examples here, good project, working very well, and I think our job is to document those projects. To make them available to people worldwide, and make sure people can use them. It's not just about normalizing them, but it's to make them available and make [inaudible] available so they can use them. Thanks.

MALE SPEAKER: Please, Mr. Benn.

DR. CHRISTOPH BENN: Just on behalf, Rwanda would like to echo what Mark said at the beginning, that we want to express our deep appreciation and gratitude to the government

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

of Rwanda and all people of Rwanda for hosting this conference. It was the first time that we organized this implementers meeting together with [inaudible], World Bank, WHO, UNICEF, UNAIDS, Global Fund. I think it was a great success. We brought implementers from all over the world together and they learned a lot from each other. Most of all, my impression was that we learned a lot from Rwanda, actually. Because we've heard about such excellent examples that we can all take home and implement elsewhere. Really from scaling up treatments to taking treatment from the cities to the rural health centers, to how to establish a community based health insurance system, and now this morning we heard about the example of Rwanda caring for orphans and vulnerable children. I think there have been so many lessons that people now will take back to their home countries from Rwanda, and we are really very grateful for that and that was a very particular experience.

MARK SCHLACHTER: Very good. Yes? Mildred, yes.

MILDRED: Thank you very much. First I would like to say that the first question, the Minister did not address it in English, and I was very eager to get [inaudible] to the version in English, so I hope [inaudible]. And so my question is that Rwanda has impressed women empowerment in

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

terms of decision-making. Can this be a contributor to the success in combating HIV/AIDS? Minister?

DR. INNOCENT NYARUHIRIRA: Sure. For many decades, or even centuries, women have not been considered. Women stayed as a workforce in reserve. Now that [inaudible], His Excellence the President of Alla [misspelled?], called them to join all decision positions, e even including HIV fighting, we feel that since then, since that time, there is a big improvement. You find that in many, many organizations, associations, we find women being at the positions of decision-making. It is very important. Again, let's say that we know even during our struggle that women, when they decide to do something, they are involved in any struggle, you are likely to have them succeeding. This is the aspect of gender that I would like to stress out. Another thing is that as matters, what we saw, and you can see the figures. When we are talking about testing, they are responding very quickly. Not just the 97% in all statistics agreed to be tested. Whereas with the first experience, before we got the anti-retrovirus, when we asked women to come with partners, only 20% turned up. Only 20%. At that time, it was a shame, I think for us as men, because the courage, we didn't have that courage of knowing our status. So, we are relying on them, and again very unfairly. They

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

are more affected by HIV, economically and physiologically, as you know.

So coming back to the first question was what's Rwanda going to keep from this conference? I think from the theme of partnership for development. It is very important. We saw that partnership on one side between Rwanda and organization, and we the implementers. The turn up was very impressive. And the level of the papers which were presented were very high. So we got very good lessons, and we are going to learn more with the wrap up, certainly. But coming back to the partnership, we could humanize the fight against AIDS in Kigali. We saw it in this very compound, in this campus. During four days, we've met extraordinary people. This time it was not about talking only about success, but it was really to exchange and interact. We could see the faces of the implement, the donors, who could put now faces, human faces, on e-mails and many other books, many exchanges. We interacted through internet, through telephone, but now we could see that these people who are here on the panel are really people who are involved in the fighting against AIDS. They are talking about realities and they came close to realities.

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

MARK SCHLACHTER: Good. General [inaudible], we have time for just two questions. Let's take one here, maybe Martin.

MARTINS: Thanks. My name is Martins, and I work for ACBC Channel Africa. I'd like to direct my question to Mr. Sidipi [misspelled?] and Madame Walter. The access to ARVs in some African countries is not only [inaudible], it's not being done. Not because of lack of means, but also because of some African policies. Here of course, I'm referring to the misunderstanding between some international institutions in South Africa. I'd like to have your comment about this, the access to ARVs.

MICHEL SIDIBE: First of all let me also join the colleagues to say that it was a really, one of the best meeting I've been for a long time. Energy was high, enthusiasm was there, and people were coming here as donors and recipient countries. People were really true partners. They have been exchanging information, trying really to build a consensus on future direction. Your question is a very pertinent question. You know Remambe [misspelled?] just saw a few years ago, I can say, three years ago, where around 50,000 on ARV on our continent. Today we are talking about above 1 million people, we've a strong participation from Global Fund, and [inaudible] we managed really to increase

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

the coverage; even it is representing only 25% of the people in need of treatment. Your question about the policies, I don't think so we have a major challenge today. If I want to address the issues of South Africa, because you are talking about that. South Africa is certainly the countries today who have the numbers, the highest numbers of treatment. They have around 250,000 on treatment today, which is a major, major breakthrough. We know that we've context of South Africa, we've resources which are there, we've opportunities which are existing, we can even scale up more quickly, that is very clear. We are experiencing now a major change in South Africa. I can tell you that Peter Piorta [misspelled?], Executive Director of UNAIDS just came from South Africa. He was in Durban for a meeting and he's seeing a [inaudible] change in the way the government of South Africa is trying to address the response to HIV/AIDS. We need really, certainly to address other issues, which are really about how to really sustain what is happening. I was sharing at the beginning; the first day that Rwanda came from I can't say even 400 people in treatment a few years ago, to 40,000 people. What is really important today is how we sustain that. How we make sure that we really think with Rwanda government about really alternative approach in terms of a delivery system which can be less costly, which can

¹ kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.

really help us to continue to reach those who are not reached. That is a major challenge, not only for Rwanda, it is a major challenge for the partnership which is around this table. It is a major challenge for most of African countries.

MARK SCHLACHTER: Let me ask Francoise just to make a quick comment on that question, and then I'm afraid we're going to have to let our participants return to the plenary. Francoise? [Laughter] Your choice, Francoise.

FRANCOISE: [Foreign language.]

MARK SCHLACHTER: Thank you, [inaudible]. I'm sorry that's all the time we have. Our participants must race back to the plenary. Thank you ladies and gentlemen.

[END RECORDING]