

**XVI International AIDS Conference: August 13-18, 2006**  
**Closing Session**  
**August 18, 2006**

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[START RECORDING]

**FEMALE SPEAKER:** Please join me in welcoming Yvonne Chaka Chaka, the princess and music diva from Africa.

[APPLAUSE]

**PRINCESS YVONNE CHAKA CHAKA:** Thank you very much. This is on behalf of all those HIV children and women who died of malaria, TB and HIV. Thank you very much. The song is called "Power of Africa." Oh, if you can clap, you can, because you've been working very hard and thanks to you.

[SONG PERFORMED]

Thank you.

[APPLAUSE]

**RON ROSENE:** Good morning and welcome to the closing session of AIDS 2006: The XVI International AIDS Conference. [FRENCH TRANSLATION] It's my pleasure to introduce my co-host, Esther Terrell. Esther currently works as a brilliant health promoter at Women's Health in Women's Hands here in Toronto, a community health center for black women and women of color in the Toronto and surrounding area. She has been involved in the AIDS movement here, locally, nationally and internationally, for almost 15 years. And I am delighted that she is my co-host.

[APPLAUSE]

**ESTHER TERRELL:** It's my pleasure to introduce my co-host, the lovely Ron Rosenes. He is the vice chair of AIDS

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2006 Toronto, local host board of directors. Ron is a former teacher and entrepreneur who has been living with HIV/AIDS for close to 25 years. [APPLAUSE]

Since his retirement from work in 1991, he has been reinvented himself as a recognized community volunteer and leader and advocate for the rights of people living with HIV, through his work with groups such as the AIDS Committee of Toronto, the Canadian Treatment Action Council, the Ontario HIV Treatment Network, the Sherban [misspelled?] Health Center. Ron has sought to improve access to care, treatment and support for people living with HIV/AIDS. And I am very, very delighted to co-host this event with him.

**RON ROSENE:** Thank you. [APPLAUSE] Thank you. As all of us know, a conference on this order of magnitude would not be possible without the generous support of our funders, our donors and our sponsors. We would like to recognize their generosity.

**ESTHER TERRELL:** The government of Canada.

**RON ROSENE:** Province of Ontario.

**ESTHER TERRELL:** City of Toronto.

**RON ROSENE:** The European Union.

**ESTHER TERRELL:** The Swedish Ministry of Foreign Affairs.

**RON ROSENE:** The Swedish International Development Agency.

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**ESTHER TERRELL:** Bill and Melinda Gates Foundation.

**RON ROSENE:** GlaxoSmithKline, Positive Action.

**ESTHER TERRELL:** MAC AIDS Fund.

**RON ROSENE:** OPEC Fund for International Development.

**ESTHER TERRELL:** Ontario HIV Treatment Network.

**RON ROSENE:** Abbott.

**ESTHER TERRELL:** Boehringer Ingelheim.

**RON ROSENE:** Bristol-Meyers Squibb.

**ESTHER TERRELL:** Roche.

**RON ROSENE:** Gilead.

**ESTHER TERRELL:** GlaxoSmithKline.

**RON ROSENE:** Pfizer.

**ESTHER TERRELL:** Irish Aid.

**RON ROSENE:** Royal Norwegian Ministry of Foreign  
Affairs.

**ESTHER TERRELL:** World Health Organization.

**RON ROSENE:** The Australian Government.

**ESTHER TERRELL:** Globe and Mail official French media  
sponsor.

**RON ROSENE:** And the Canadian Broadcasting  
Corporation, CBC Radio-Canada, our official host broadcaster.  
Thank you very much.

[APPLAUSE]

**ESTHER TERRELL:** And now it's my pleasure to introduce  
our first speaker for these closing ceremonies. Glenn Marais is

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a gifted singer-songwriter who plays guitar, harmonica and piano. He currently performs as a solo artist for a band, Haight Ashbury. In November 2005, Glenn flew to Africa to film a video for his song *Like a Child*. It debuted on "Much More Music" on January 30, 2006 and is currently number one on "Much More Music's Clip-trip Show." Please welcome Glenn Marias.

[APPLAUSE]

**GLENN MARIAS:** I'd like to dedicate this song to all the men, women and children around the world who have needlessly suffered, who are now suffering needlessly because of the ignorance and complacency of our global community and its leaders. This song is called *Like a Child*.

[SONG PERFORMED]

[APPLAUSE]

Thank you.

**RON ROSENE:** Thank you, Glenn, for that beautiful and heartfelt song. Thank you. [APPLAUSE] What SARS did to tear this city apart, this conference has done to put it back together. [APPLAUSE] And now, our host broadcaster, CBC, has some retrospective moments from the week that ends today.

[MUSIC PLAYED]

**FEMALE SPEAKER:** So it is time for us to [inaudible] promises made are promises kept. We must demand action over rhetoric and evidence over ideology. It is time to deliver.

**FEMALE SPEAKER:** It is with great pride that I now declare

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the XVI International AIDS Conference officially open.

[APPLAUSE]

**FEMALE SPEAKERS:** Women's rights are human rights.

Women's rights are human rights.

**FEMALE SPEAKER:** We have end this disease now. We have to get the drugs to the people who need them. We have to put the funding that's needed into ending AIDS now.

**FEMALE SPEAKER:** I want you to let the world hear loud and clear that women and girls will no longer be silenced in this pandemic. [APPLAUSE]

**MALE SPEAKER:** We need more political leadership. We need the willingness of leaders to be outspoken on HIV as the leading issue of the day.

**MALE SPEAKER:** HIV has increasingly become a black and brown disease - a broad and domestically -

**MALE SPEAKER:** We have lost an incalculable number of lives which should never have been lost. That is a matter of excruciating pain and unconscionable political neglect about which historians will one day write.

[MUSIC PLAYING]

**MALE SPEAKER:** This is a story that will have a happy ending because of the energy of the people at this event.

[MUSIC PLAYING]

**MALE SPEAKER:** This epidemic is 100-percent preventable.

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[MUSIC PLAYING]

**FEMALE SPEAKER:** People will walk away saying that they really did take something home, not only people in the developed world, but also people in the developing world that they can take and use in their own countries.

[MUSIC PLAYING]

**FEMALE SPEAKER:** I just want everybody, especially parents, talk to your children. That's the most important thing, I think, when dealing with HIV/AIDS, is communication because without that, kids, we're going to be left in the dark.

[MUSIC PLAYING]

**FEMALE SPEAKER:** There has just been so much loss and so much of it unnecessary. I think about people I knew and people I've worked with and it's just sad.

**FEMALE SPEAKER:** Ending AIDS will not be the success of one great scientist, one great community leader or one great leader. It will be an accomplishment of a whole human family working together for one another.

**MALE SPEAKER:** I light this candle on behalf of all of us who are living with HIV and AIDS.

[MUSIC PLAYING]

[APPLAUSE]

**RON ROSENE:** It is now my great pleasure to bring Mark Wainberg to the podium. Mark, as you know, is the co-chair of this conference and is the director of the McGill University

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AIDS Centre, professor of medicine and of microbiology at McGill, and one of our most recognized scientists internationally. But through the course of this conference, Mark has become a lot more than that. To me personally, he has become a friend and, above all, I treasure him as one of our great activists who is bringing the issue in all of its scope to the world. Mark.

[APPLAUSE]

**MARK WAINBERG, Ph.D.:** Thank you very much, Ron. Dear friends [FOREIGN WORDS]. Hasn't it been a fantastic week?

[APPLAUSE] On behalf of the entire Toronto local host, I want to say how proud we all are that our time here in Toronto has been such a success.

I want to begin by thanking my co-chair, Dr. Helene Gayle and the entire staff of the IAS for their excellent, competent work. [APPLAUSE] I want to pay special thanks to Daryl Perry, the director of the local Toronto host organization and to Max Unland [misspelled?] the IAS Conference director, for a fantastic job. [APPLAUSE] Let me also thank our 2000 volunteers from both here and Toronto and around the world. [APPLAUSE] They have worked tirelessly. They have worked tirelessly to make this conference a success. And thanks also to our many paid staff.

We have shown here this week that partnerships that link science, medicine, community and political activism can

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translate into action. Many people have also told me that this conference has included groundbreaking science with an enormous amount of information on new drugs and prevention strategies that give hope to the future. Great science and our outstanding global village are an unbeatable combination.

[APPLAUSE]

Many people have also said that this was one of the best conferences ever at linking the North and the South. I only hope that they were not talking about the long walks that we have subjected you to between the two separate buildings of this conference center. [APPLAUSE]

I want to thank as well the many members of the academic community across Canada and abroad, but especially here in Toronto who have helped to organize this conference. The University of Toronto is a world-class institution that is fully committed to the global battle against HIV and AIDS in each of its many faculties and departments. Thank you for loaning us your faculty members who have provided such high-level leadership. [APPLAUSE]

But I also want to remind you all that this conference cannot be deemed a success unless we collectively realize our theme of Time to Deliver. Indeed, we will have failed unless we dramatically and rapidly expand by millions the numbers of people around the world with access to antiretroviral drugs.

[APPLAUSE] Clearly, progress cannot be achieved if more people

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continue to become infected by HIV each year than the numbers that are able to access treatment.

In this context, we also recognize the problem that is sadly posed by HIV denialists [misspelled?]. And it is correct that we ask how many additional millions of HIV cases are attributable to the failure of certain world leaders to directly and honestly address issues of HIV/AIDS with their people. [APPLAUSE]

In South Africa, as an example, which has more cases of HIV than any country in the world, it is unconscionable that government leaders still do not speak openly about HIV and instead talk about lemon juice as a key prevention strategy. [APPLAUSE] We all know that such talk about lemon juice as a mode of HIV prevention is scientific nonsense. Why don't the government leaders who need to impart critical messages to the vulnerable people of their country also understand this basic fact? [APPLAUSE]

Many of you heard my remarks at our opening in which I lamented the absence of the Canadian prime minister, Mr. Stephen Harper. [APPLAUSE] It should be noted, however, that the government of Canada has been extremely generous to this conference, and for this we are grateful. It is also worth mentioning that the type of direct criticism of political leaders that you have heard at this conference might not be as easy to articulate in many countries. I am proud to be a

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Canadian and I am proud to live - [APPLAUSE] I am proud to be a Canadian and I am proud to live in a mature democracy in which our right to free speech is perhaps our most cherished freedom that empowers our efforts to promote social justice and public health. [APPLAUSE] And it is probably now also safe to assume that the president of Mexico will attend the next International Conference on AIDS. [LAUGHTER] [APPLAUSE]

Helene and I hope that you have all enjoyed this wonderful week together with us. Let us leave Toronto with the commitment that we will now work harder than ever. There is no time to waste. It is time to deliver. Thank you. *Merçi beaucoup.* [APPLAUSE]

**ESTHER TERRELL:** Our next speaker is a young woman, Kecia Larkin, who is a member of the [inaudible] HIV/AIDS Network. She has been living with HIV since 1989 and has dedicated her life to educating aboriginal communities about HIV/AIDS. Join me in welcoming Kecia Larkin. [APPLAUSE]

**KECIA LARKIN:** Good evening. First of all, I'd like to acknowledge the traditional and indigenous people whose land we reside and visit on - the missasagous [misspelled?] of the new credit. [APPLAUSE]

I stand here before you today as a mother and a woman living with HIV. In 1988, I contracted HIV through my partner unknowingly. And at that time, AIDS was a death sentence. And this is a grief that I carry with me today, as we have lost

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many of our brothers and sisters to this disease.

Today I stand before you with my daughter, as a mother.  
[APPLAUSE] In our tradition of the Qua-Qua QO [misspelled?] and Pagani [misspelled?] people of Canada, traditionally, we had what were called rights of passages when a young woman or man would make the transfer from being a child to an adult. This tradition no longer exists amongst many of our tribes because our culture and our language has been repeatedly challenged and destroyed for the past 500 years. [APPLAUSE] Without acknowledging this, we can not acknowledge where we are going in our future. Our people talk about our future being our children. Our children will be the ones to carry us, to care for us when we are ill. At least, this is the way it is supposed to be.

I have traveled to many, many communities across Canada and the United States to put a face to HIV, to try and show my people that this does happen to us and it is happening at epidemic proportions. Although people are reluctant to say that this is an epidemic amongst the First Nations People of Canada, I am here to tell you, yes, it is an epidemic - very much so alive in our communities. [APPLAUSE]

I will no longer be silenced about this truth. And in order for us to acknowledge this, we have to talk about the colonization and cultural genocide of our people. [APPLAUSE] These are very painful topics to talk about. It is hard for me

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to tell my daughter, who is half native, of the history of Canada and the indigenous people of this land. But in order for her to know where she is headed in her future, she has to know where she comes from and what challenges she faces in her life. [APPLAUSE]

I have traveled to communities all over Canada. I have been to communities where every community member communicates through a translator to outsiders. These are the Inuit people, these are the Cree people, these are the Denai people. These are the people that are the indigenous people, even to me. And the social conditions that these people are living in are very much like Third World countries that are still developing.

[APPLAUSE]

I have been to communities where there is no running water and you have to walk in order to even get to a health clinic. And I have to acknowledge that our indigenous people of Canada are the developing people of Canada. [APPLAUSE] The reason why I say this is because I want us to be acknowledged at an international level for the challenges that we face and the complacency that the federal government has for our people on the reserves - the people that this disease is hitting.

[APPLAUSE]

I am pleading with the international community to please include us in your international discussions and please help us because this is an epidemic. It is killing our people.

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It is affecting our next generations to come, our children and our grandchildren. And we talk about the seven generations - The seventh generation is coming and how are we going to tell them how we responded to this disease? How are we going to face them and tell them we did not do enough and there was more that we could do? I am asking you, as a mother, to ask yourself this question. I am asking you to look deep into your hearts to find a way to help all people living in the world with HIV.

One of the challenges that we have in our aboriginal community, in our indigenous community in Canada is we are expected to fit into a non-indigenous method of thinking, of doing, of believing, and of educating our own people. And I am here to tell you, it does not work. It cannot work.

[APPLAUSE] To me, this is a way to further colonize and oppress us and it is not okay. [APPLAUSE] I do not want to take away from all of the work that our brothers and sisters have on an international level because we hear your cries, we hear your pleas and we are with you every step of the way - and we will be in Mexico in 2008, you can count on that.

[APPLAUSE]

One of the reasons why my daughter is standing here before you today is because her rites of passage has come in the world of AIDS. Her life has been directly affected by HIV. And if I had breast cancer, she would have a lot more support

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in everyday society. But as it is right now- [APPLAUSE] - as it is right now - now I know this seems like a contradiction, but we kind of have to be careful of who we tell and who knows because of the stigma and discrimination that is still attached to having this disease. And I want all the support for my children and for the future generations to come - on reserve, off reserve, Inuit, Maté, First Nations, treaty, non-treaty, however the government chooses to label us, we are not going away anytime soon. [APPLAUSE]

I am going into my second decade of living with HIV. How and why I am alive today, I cannot tell you. What I can tell you is we have still so many more challenges ahead of us and I am very deeply committed, my life, to this work. I would like to say thank you very much to each and every person who made it possible to bring us all here together today because our stories are so important to share. It reminds us of why we are doing this work. It reminds us of what is most important - gala cas la [misspelled?] Thank you. [APPLAUSE]

**RON ROSENE:** Colleagues, friends, guests, we pride ourselves in Toronto as being a place of welcome for voices of dissent - a place that makes room for all voices. We have been asked at this moment in the program to accommodate some groups that have messages they would like to bring. We have agreed to give each of these three groups one minute each for your attention, please.

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First, from the Treatment Action Campaign of South Africa, Nkhenseni Mvasa. [APPLAUSE]

**NKHENSENI MVASA:** I greet everyone - our protocol of that. Three things that I want to talk about - accountability. There is a demand as civil society and other people who are living with HIV and all organizations who are concerned. On the action to put all the political leaderships accountable in order to do or to fulfill the promises that it made and also a call and an appeal to the scientists and research, not only to research about the statistics, but also to research about the prevention translating it and also to make sure that the epidemic goes down.

The second thing is the issue that [inaudible] demanding on is the issue of target on prevention and treatment by 2007. The third thing is the International Day of Action on Violation of Human Rights, particularly people are living with HIV-positive. As we can see in rural areas, the thing that is happening is that the people are living with HIV, their rights are being violated every day, every second, every minute. So we have a demand on the International Day of Action that everyone on that day will be surviving will make sure that there is an action to make sure that those things happen.

The last thing is the issue of [inaudible] and women. We are talking of greater involvement of people living with HIV and AIDS. But when we look in this conference, we find that

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only the professionals and only the intellectuals are addressing. But we, the people who are living with HIV who are just attending to just be the number of that we are here.

[APPLAUSE] And the last thing is a call to support the condemnation of the management of the [inaudible] who have threatened to suspend [inaudible] who puts on a baton and a red ribbon, who also putting this International AIDS Conference. So it is a call to everyone who is listening here to make sure that we condemn this because this is the violation of human rights. I thank you. [APPLAUSE]

**RON ROSENE:** Thank you. Thank you. From the Delhi [misspelled?] Network of Positive People, Loon Ganche [misspelled?] [APPLAUSE]

**LOON GANCHEY:** Let me hear the voice of people living with HIV/AIDS. [APPLAUSE] Universal accessory, how is a human right? It's immoral, unacceptable, unjust and outright genocide, where in the risk, people can buy life. And while the poor peoples are condemned to [inaudible] unnecessary, untimely and unjust death. [APPLAUSE] We demand universal and free access to all essential medicine. [APPLAUSE] People [inaudible] all the government officers out here, please remember when you sign for FDA, our life is at stake. [APPLAUSE]

**RON ROSENE:** Thank you. From Front AIDS Russia, Isrushka Fidirazi [misspelled?] Alexander Rumiantsev.

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**ALEXANDER RUMIANTSEV:** Hello. I am from Russia and I am going to speak in a very Russian way. [LAUGHTER] "No" to capitalism. The market system is unable to give drugs to the people who need them. [APPLAUSE] "No" to the imperialism of the pharmaceutical companies. They should not be deciding the price of our lives. [APPLAUSE] Activists from throughout the world unite. They should know that we are everywhere.  
[APPLAUSE]

**RON ROSENE:** Anders Nordstrom is a medical doctor from the Karolinska Institute in Sweden. Dr. Nordstrom is currently the acting director-general of the World Health Organization. Dr. Nordstrom. [APPLAUSE]

**ANDERS NORDSTROM, M.D.:** Thank you. Dear colleagues, I feel very humbled to speak after engaged [interposing] time to deliver is a call for action. During the last few years, we have seen a sequence of important in fashion political promises to address HIV/AIDS. The result is an unprecedented global commitment to works towards universal access to HIV/AIDS prevention, treatment, care and support.

However, no more statements are needed. It is time to deliver on the promises that have been made. [APPLAUSE] This conference has highlighted importance of an even stronger focus on women and young people all over the world who bears the greatest burden and needs particular attention. Each of us now, as we prepare to return home, must take with us the

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vigorous sense of this responsibility for action.

There are three key areas that I would like to talk about now in a few minutes for action and delivery. It is money, medicine and a motivated health work force. Let me start with the money. There has been some important progress worldwide. Resources for HIV/AIDS increased over eight billion U.S. dollars last year. But this is still far from enough. The estimated needs in low- and middle-income countries is \$15 billion U.S. dollars this year, growing to \$22 billion U.S. dollars in 2008. This widening gap must be filled and commitments sustained. This is no longer only an emergency. This is, as Peter Piot said as his introductory remark, this is a long-term developing agenda that we need now to focus on.

It is a call for more than traditional development assistance, innovative financing mechanisms are now emerging, such as the UNITAID [misspelled?], the initiative by France, Brazil, Chile, Norway and the UK, which puts a levy on airline taxes to channel new money to HIV/AIDS work. This is very much welcome. [APPLAUSE]

Last month, I attended the G8 meeting in Saint Petersburg and all the G8 leaders pledged their contingent financial and political support. However, we have to hold them firmly to that. We need also to work on it domestically. National governments need to make a charade to funding priority and sustain their commitment to health.

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Let me now turn to medicines. Access to drugs remains critical. Three by five, impress the landscape and change the thinking. This progress needs to be sustained. The tenfold increase in people on treatment in Sub-Saharan Africa shows that we can do it. Sub-Saharan Africa also illustrates what still needs to be done. It represents 70-percent of the global unmet need for treatment. There is a growing momentum today for innovation, research and intellectual property issues to insure maximum access to new products that will save lives. We need ideas to turn into new drugs and diagnostics that strengthens our ability to safely treat infants and children as well as adults.

We need to invest more in developing new prevention tools including microbicides and of course vaccines. Support for these needs is coming from many different directions. Advanced market commitments can, for example, and depend research and development of essential drugs and vaccines. The prices - the pricing - we have made some substantial progress, but much more is needed.

Again, last month, I attended a meeting with the Secretary General Kofi Annan in New York, together with the chief executive officer for some of the largest pharmaceutical companies and I would say that we had a very concrete discussion in terms of what in fact can be done more in terms of increasing access to second-line drugs and drugs

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specifically targeting children.

UNAIDS plays a critical role in continuing to focus the world's attention on the challenges and the global fund in challenging resources to where they are most needed. A special word of thanks to the Bill and Melinda Gates Foundation for their recent grant for the global fund. This needs to be followed also by others and also for their support to new technology in the area of prevention.

Finally, and perhaps the most important area to insure success in achieving universal access is in the area of skilled and a motivated health work force. I am very happy that the conference has been now focusing on these issues. No improvement in finance or medical products can make a lasting difference to people's life until the crisis in health workforce has been solved.

The situation calls for drastic measures. There are too few people with the right skills. More people registered to attend this conference than there are doctors in the East and in Southern Africa. The number of health workers are being diminished day by day, by disease and lack of incentives. Countries with HIV/AIDS prevalence of 15-percent or more can expect to lose more than 30-percent of the health care workforce over the next 10-year period. It is crucial that we protect and support our health workers, that will-

[END RECORDING]

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