

Remarks by Mrs. Graça Machel
CEPA Advocacy Summit
Johannesburg, South Africa, 22 October 2009

Good morning.

It is a great pleasure for me to join you this morning and offer my personal welcome to South Africa to all of you. The issue that you are addressing this week is close to my heart and to the hearts of millions of people across Africa – preserving the health and well being of our children.

Let me state this bluntly - our continent is facing potential social, political and economic devastation as a consequence of the impact of HIV and AIDS on our children.

Africa has the world's largest burden of pediatric HIV and AIDS. Of the estimated 2 million children living with HIV infection globally, 1.8 million are in sub Saharan Africa. In 2007 (the most recent year for official World Health Organization figures), the numbers of children living with HIV in the countries where CEPA is being launched are both daunting and horrifying:

- **In Zambia:** ninety five thousand children are living with HIV, yet it can take anything from eight to sixteen weeks for the results of an infants HIV test to be returned from the lab
- **In Mozambique:** one hundred thousand children are living with HIV and we know that twenty two thousand children under the age of 15 died as a result of this disease in 2008
- **In Uganda:** one hundred and thirty thousand children are living with HIV
- **In Tanzania:** one hundred and forty thousand,
- **In Kenya:** one hundred and fifty five thousand,
- **In Nigeria:** two hundred and twenty thousand,
- And here in **South Africa:** two hundred and eighty thousand children are living with HIV, yet an estimated 40 percent of those children who need treatment, are not able to access it.

We can become blinded by such huge numbers – so we need to keep reminding ourselves that each and every one of those children is unique, is special and is much loved by his or her family and community.

Every single one of those 1.8 million children has a right to health, a right to life, a right to develop to his or her full potential, and a right to a future. Each one of those children must be our motivation to end pediatric HIV and AIDS, not in ten or twenty years time, but NOW.

Children in Africa are living with this debilitating disease and dying needlessly – and this is both a tragedy and an outrage. How can we stand back and watch the suffering of our children when we know that the world has the necessary means – medical, financial, intellectual – to end the destruction that is pediatric HIV and AIDS?

The core formula for ending pediatric HIV and AIDS is, in reality, quite simple:

- Effective antiretroviral medications for HIV positive mothers to prevent transmission of the virus in utero.
- Rapid diagnosis and effective antiretroviral medications for children born with HIV to keep them healthy and AIDS free.

This core action must be wrapped in the other services needed to ensure healthy, well developed children, including family centered care, adequate nutrition, and appropriate palliative care. We must ensure that our health systems are strong and fully resourced, with the capacity to provide care and treatment to all who need it. Without people and facilities to ensure distribution of life saving medications and care, we cannot end this epidemic.

Civil society organizations across the continent have more than 25 years of experience combating HIV and AIDS, and we know that dispensing pills and providing care will not by themselves end the epidemic. Leadership is key to breaking the terrible cycles of this disease in Africa. We must join with governments, community leaders, the private sector, medical professionals, child rights activists, as well as funders to encourage leadership at all levels of society.

We must hold our governments accountable and ensure they develop effective public health policies and put the systems in place to combat pediatric HIV. At the same time, civil society must play a strong and constructive role in assisting government to meet their obligations to our children.

We must collaborate with and capitalize on existing global initiatives that are working to strengthen health systems and reduce maternal and child mortality in Africa, including:

- The Global Alliance for Vaccines and Immunisations
- The Global Fund to Fight AIDS, Tuberculosis, and Malaria
- PEPFAR
- The Taskforce on Innovative International Financing for Health Systems
- The Global Campaign for Health Millennium Development Goals
- UN agencies including WHO, UNAIDS, and UNICEF, and
- UNITAID, among many others.

CEPA has other roles to play as well:

- We must advocate for larger allocations of global resources specifically earmarked for pediatric treatment and care
- We must monitor such allocations - for example, how much money coming into the region is earmarked for treatment, and how much is specifically earmarked for pediatric treatment.
- We must monitor effective use of money and resources
- We must monitor national health budgets to see how much money is earmarked for children.
- We must monitor national health targets and hold our governments to their promises.
- And finally, we must partner with government and others to raise the resources needed to train more and better pediatric practitioners, nurses and social workers to provide care specifically for children with HIV and AIDS.

A focus on children has been an important part of my life's work. As a mother, as a teacher, and as a human rights activist, the well being of children has always been close to my heart. I have to believe that will fight to make sure that CEPA will achieve its goals, and that we will one day see the end of pediatric HIV and AIDS in Africa. Indeed, throughout the world.

So it is with pleasure that I can tell you that I am delighted to accept your invitation to serve as the Chairperson of the CEPA Leadership Council, a body envisaged to provide guidance and direction to CEPA on the African continent. The council is yet to be finalized, but I am happy to be counted among those in Africa and elsewhere who are standing up to help end pediatric HIV and AIDS.

And I would like to ask a few others here to stand up now as well. Could our dedicated colleagues from the nominated CEPA countries please stand for a moment - Kenya, Mozambique, Nigeria, Tanzania, Uganda, Zambia, Zimbabwe, Côte d'Ivoire and South Africa.

Thank you. Please know that I stand with you in your fight to end pediatric HIV and AIDS in your countries. You have my support, my encouragement, but most of all my gratitude, for the work you are doing on behalf of the children of Africa, and for the future of our continent.

I look forward to learning of your successes, collaborating to overcome challenges and one day celebrating with you the end of pediatric HIV and AIDS - because that day will come, and your hard work will usher in a new dawn and new hope for Africa's children.

Now, let's all stand and give a round of applause to wish you all great success as you launch the campaign to end pediatric HIV and AIDS.

Thank you all for giving me the opportunity to learn a little more about your work, and to join you in the Campaign to End Pediatric HIV/AIDS. I wish you a successful conclusion to your meetings, and a safe journey as you depart tomorrow.

Final 10-22-09 11:00a.m.