

**First Lady's Speech at  
the 18<sup>th</sup> Ordinary General Assembly and 15<sup>th</sup>  
Anniversary of  
the Organization of African First Ladies against  
HIV/AIDS (OAFLA)**

**Addis Ababa, 31 January 2017**

**Our gracious host, Excellency First Lady of the Federal  
Republic of Ethiopia,  
President of OAFILA, Excellency First Lady of the  
Republic of Malawi,  
Excellencies dearest sisters,  
Executive Director of UNAIDS,  
Honourable ladies and gentlemen,  
All protocols observed,**

**Good Morning.**

It is with great pleasure that I stand before you, dear sisters and distinguished guests, on this special day that marks the 15<sup>th</sup> anniversary of OAFILA, as celebrated through its 18<sup>th</sup> General Assembly.

**Dear sisters,**

15 years ago, we organized around the calling to bring an end to the AIDS epidemic. An epidemic that took the lives of millions of people, over a course of just two decades.

The urgency of that situation could not be ignored; we could no longer delay in fighting this disease that was robbing our people, of all ages, of their opportunities to fulfill their full potential. So each one of us proposed pertinent solutions, to be efficiently implemented in our respective nations, and through our respective foundations.

As we take a moment to evaluate our 15-year journey, I ask you to not only celebrate the achievements realized thanks to our growing commitment, and that of our valued partners, but to also take a moment to reflect upon the work we are yet to do.

### **Honourable guests,**

Over the years, global progress toward ending AIDS has been one of great significance. And yet, Sub-Saharan Africa remains the most severely affected by HIV and AIDS<sup>1</sup>.

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<sup>1</sup> Of the 36.7 million people living with HIV, 25.6 million [23.5 million–26.1 million] are living in sub-Saharan Africa, the region hardest hit by the epidemic. ([www.aids.gov](http://www.aids.gov))

There are 3.2 million of children, under 15 years old living with HIV/AIDS, and 2.5 million are in sub-Saharan Africa. There are 3.2 million of young people (15-24 years old) living with HIV/AIDS in Africa (out of 4 millions globally). The UNAids Gap Report 2014

A child dies every minute of an AIDS-related illness, and we lose at least one million people to this pandemic, every year. This is the reason:

- why we cannot give up,
- why we must never give up,
- why we will never give up!

Countless trials over the years have shown the positive impact in our countries, of promoting, and advocating for maternal and child health in relation to PMTCT.

For instance, in 2001, Rwanda launched a national programme aimed at reducing, and eventually eliminating mother-to-child transmission of the virus.

Sixteen years later, 97% of health facilities in Rwanda provide services for the Prevention of Mother to Child Transmission (PMTCT). Through these services, HIV

transmissions from mother to child have since dropped from more than nearly 10% to 1,8 %, in 10 years<sup>2</sup>.

### **Distinguished guests,**

Our years spent combatting the spread of HIV/AIDS has often left us wondering why we were significantly reducing transmissions rates on one front, only to see this virus take on a new face by attacking a new demographic group.

This is the current case, as we see the HIV/AIDS epidemic affecting in growing numbers, the lives of our young people. Recent research reveals that on our continent, AIDS is now the leading cause of death among adolescents aged 10 – 19 years old, with adolescent girls being the most affected demographic<sup>3</sup>.

Realizing that this virus is affecting the active populations, who are meant to be the future driving forces of our

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<sup>2</sup> *[National HIV annual report, 2015-2016, Rwanda Biomedical Centre](#)*

<sup>3</sup> Girls aged 15-19 years old account for 7 in 10 new infections. Globally, 80% of 15-24 year old women living with HIV/AIDS are in sub-Saharan Africa.

societies, and our economies, is as revolting as it is frightening.

Indeed, we now know that the impact of HIV/AIDS is multi-layered and has gone beyond a public health issue, to becoming a full-blown development one.

In the public spheres, the fight against this virus requires more investments for the prevention and treatment of AIDS-related diseases, at the expense of other health, and development priorities.

**Honourable ladies and gentlemen,**

Allow me to recall our AU vision for 2063, of *‘an integrated, prosperous and peaceful Africa, driven by its own citizens and representing a dynamic force in the global arena.’*

What lies between us and this noble vision, is the invisible and lethal threat of the AIDS pandemic.

This is:

- why we cannot afford to give up,
- why we must not give up,
- why we will never give up!

To borrow the words of UNAids Executive Director, Michel Sidibé, ‘*Complacency is the new conspiracy—and it must be broken!*’, we need to take a harsh look at these statistics, that show that our youth, and in higher proportions, our younger women, are at greater risk of contracting the virus. Then, we must take more decisive action.

As a community, we must protect these precious lives, for their health will determine the wellbeing of the next generations, and by extension their ability to thrive, and become the innovators and trendsetters needed for the development of our continent.

As a community, we must look into the depths of our African cultures for socially-responsible initiatives, well-thought-out programmes and campaigns; the kinds that

encourage prevention and treatment, while fighting stigma within our communities.

As a community, we must concentrate our efforts towards achieving the ambitious goal of 90-90-90<sup>4</sup> by 2020.

As a community, while further investing in the search for more effective drugs, until that day, that a cure is found, we must continue supporting research that study behaviors, to help prevent new infections, if we are going to eradicate AIDS by 2030.

**Honourable ladies and gentlemen,**

We must continue to build on the work done so far, by maintaining the different partnerships with government institutions, development partners, and most importantly the active support of people living with HIV and AIDS in

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<sup>4</sup> By 2020, 90% of all people living with HIV will know their HIV status. By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy. By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression.



our communities, if we are to stay the course in this fight against HIV and AIDS.

It is indeed everyone's responsibility to hold the torch of hope.

In order to harness the demographic dividend, we owe at least that much to future generations, the opportunity to '*start free, stay free, AIDS free*' by 2020.

I thank you for your kind attention and again, wish us all a happy 15<sup>th</sup> anniversary!