WINNIE BYANYIMA

JNAIDS | 2024

UNAIDS EXECUTIVE DIRECTOR REMARKS







H.E. Ibrahima Sory Sylla, Ambassador of Senegal to China, Co-chair of the Forum on China–Africa Cooperation (FOCAC),

H.E. Rahamtalla M. Osman Elnor, Permanent Representative of the African Union to China,

All African Ambassadors and diplomats at present,

My esteemed colleague Siddharth Chatterjee, United Nations Resident Coordinator in China,

Colleagues from the United Nations, Partners and Friends,

I'm privileged to be here.

We meet today to discuss history in the making. I say this because history is not made by the heroic acts of individuals, but through the collective action of people, acting in solidarity for the good of all.

Global South cooperation—through south-south tripartite partnerships—can be a great trend of history—a driving force that reshapes our world—but only if we really choose to seize this moment and make the most of it.

In our 40 years of fighting AIDS, we have learned that it is this kind of solidarity this long lasting partnerships which works.

At the height of the HIV crisis, if you remember, 12 million people mostly from Africa, died without access to lifesaving antiretroviral treatments, but during that time pharmaceutical companies were selling expensive HIV medicines to the Global North. People in the global north were surviving while our people were dying because prices were out of reach.

What is it that finally allowed HIV medicines to become available and affordable for the global majority?

It was the production of *generic* versions of these same medicines in India and Brazil, and their delivery to African countries.

It was the bravery of governments in the south who stood up to legal challenges from pharmaceutical companies of the North and used intellectual property flexibilities to import generics.

It was the relentless global community advocacy and solidarity between nations. If you remember the iconic Treatment Action Campaign of South Africa, the voice of Nelson Mandela, that made the difference.

Put simply, it is because of solidarity and cooperation that people in the Global South can access HIV medicines today. Today we have 40 million people living with HIV. About 30 mil of these are on treatment. Most of them are in Africa, in the global south, accessing good quality treatment at affordable prices.

But, when COVID-19 surfaced in 2020, world leaders did not look to the lessons of the AIDS pandemic. No. This global solidarity that set up the Joint United Nations Programme on HIV/AIDS and the Global Fund to Fight AIDS, Tuberculosis and Malaria, this solidarity that existed and put people on live saving treatment and keeps them alive was not repeated for covid. No. There was no coming together.

Despite talk of solidarity of let's respond together to covid, rich countries pushed their way to the front of the queue for vaccines, used bilateral deals to secure enough doses to vaccinate their own populations many times over, 1, 2, 3 times over, hoard it, and denied the rest of the world the same chance to survive.

African institutions tried in vain to buy vaccines. They put money together, they came together. But it was more profitable for pharmaceutical companies to sell vaccines to the rich world than to save the lives of health workers, of the vulnerable in the south. I formed the coalition of more than 100 civil society organisations and the UN and worked with the AU and sat on all the committees they formed, and did everything we could on vaccine access, but we were left behind as a continent.

But COVID-19 also showed there is another way forward. China stood in solidarity with African nations, donating masks, test kits, and medical equipment early in the pandemic.

His Excellency Xi Jinping pledged that African vaccination would be a priority for China. And China followed through, donating and selling vaccines to African countries. While Northern pharmaceutical companies refused to share their vaccine technology with the Global South, China planned to support production of its vaccines in Egypt, Algeria, and Morrocco. I can also share with you that the 2 Chinese vaccines Sinopharm and Sinofax if I remember the name, both were brought for pre-qualification to WHO, the reason being that China wanted them to be available for African countries, LICs, to buy, because our countries had borrowed money from the IFIs and that money could buy vaccines but the condition was that the vaccines had to be pre-qualified by WHO. China has its own regulations and uses its own, but went to WHO to seek pre-qualification so African countries could access them with their money. But the process was so lengthy by the time they were qualified, COVID was over. It was not possible to get these 2 effective vaccines pre-qualified on time for these countries to buy them. People were dying but our own processes were not fast enough for China to make available its vaccines for our people.

In just the last few years, we have already seen incredible feats of collaboration.

China has committed \$4 billion in support for projects across Africa through its Global Development Initiative and South-South Cooperation Fund. 2023 saw \$115 million in South-South cooperation funding deployed through tripartite partnerships with UN agencies. And, in 2024, we, UNAIDS, signed our first Global Development Fund Agreement to provide rapid HIV testing kits to Iran.





The lesson is one that we have known for a long time, since the earliest days of the AIDS pandemic—that for the health of our peoples, for the security of our nations, for the resilience of our economies, we must stand together and ensure that vaccines, medicines, and other health technologies—and the research and development behind them—are produced in the Global South, by the Global South. Let me say Produced in Africa, by Africans.

That is how we secure a sustainable supply of medicines for our people.

It is these lessons which show us the path towards ending the AIDS pandemic. China has been a world leader in the fight against COVID-19, and can also lead the way towards ending AIDS as a public health threat by 2030.

China has made strong progress in tackling AIDS. The overall epidemic situation in China remains at low prevalence.

The transmission of HIV through blood transfusion and blood products has been effectively blocked, and transmission through drug injection and mother-to-child transmission are reaching the level of "controlled".

China is on a path where it can—and should—end AIDS as a public health threat by 2030.

The final hurdles for China's HIV response are the same as those across Africa. It is to reach the people living with HIV who have not yet been reached; it is to deploy the latest effective treatments and prevention medicines; and to scale up manufacturing collaboration across the Global South.

As every public health official knows, we cannot tackle a pandemic when the most impacted people are hiding.

China's Regulations on the Prevention and Treatment of HIV were first issued by the State Council in 2006 and amended in 2019 to ensure people living with HIV have the same rights as everyone else.

And just last month I was so happy to see Namibia's supreme court overturn a ban on same-sex relationships.

We cannot reach the unreached through punitive action. Through criminalisation. It will require an end to stigma—and instead extending kindness, respect, and understanding towards LGBTQI+ people, towards people involved in sex work, and people who use drugs. Let's not judge them. Let the governments take care of their health. That's how I see it.

It will require moving towards the latest prevention and treatment guidelines recommended by the World Health Organization.

And if China, with its world-leading pharmaceutical expertise, especially on Active Pharmaceutical Ingredients, can work with African countries to scale up local and regional production of health products, including for HIV medicines, we can unlock prevention and treatment for everyone, and ensure that no one is left behind, we can end AIDS.

If China and Africa stand together, the possibilities are endless.

Sharing active pharmaceutical ingredients, and developing chemical industry hubs to manufacture the outputs needed for medicines, vaccines, diagnostics, and medical devices.

Continuous training and support for African researchers, and exchange programmes for universities.

Sharing technology and know-how, and facilitating collaboration between Chinese and African manufacturers.

In short, there is a historic opportunity to forge a new path which ends the Global South's reliance on charity. A path of solidarity and respect for human life over profit.

That is the path towards an end to the AIDS pandemic. That is the path that will ensure stronger preparations for and a stronger response to the next pandemic.

And that is the path that can bend the arc of history towards a more resilient Global South, with healthier populations, stronger economies, and a better tomorrow for all our people.

Thank you so much.

