



## Collaboration between UNAIDS and Catholic Organizations

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Ladies and gentlemen, good morning!

First of all I would like to thank you for having invited me to present some facts and thoughts this morning. It is indeed an honor for me to be invited to talk to you about UNAIDS, AIDS and our collaboration with The Church. I had hoped that I would have been able to participate in the whole conference, but due to pressing work in Geneva this was unfortunately not possible.

Before I start, permit me to make a short presentation of myself, so you know who it is addressing you. I was born in Sweden and thus automatically born into the Lutheran church, and as it happened I am the only one in our family being "afflicted" by religion. During travels in Spain in the sixties I discovered the Catholic Church and felt more at home in it than in the Lutheran. I also wanted to belong to a church that is truly international, so I converted in Menorca, at the time totally untouched by tourism. I also became a Dominican for three years until I discovered that it was perhaps not God who had called me, but rather I who thought that I had the call. But again, I might be mistaken in this reasoning to.

I have been working with The Joint United Nations Program on AIDS since 1997 and during all those years I have tried to engage civil society in our work. UNAIDS has two goals; one is to get the different UN agencies to collaborate and become coherent, instead of to compete with each other. The other is to get the same UN agencies to work together on AIDS related issues. And, as the UN recognizes the importance of what civil society does, we try to engage in dialogue with various non governmental organizations.

For me it was also natural to work with faith based organization, especially with churches, and as UNAIDS had a process going on when I started to work in Geneva, which aimed at having a Memorandum of Understanding with Caritas Internationalis, I continued to broaden the work with churches, sometimes against my hierarchies will.

Just to mention the Catholic entities we work with, we collaborate with Caritas Internationalis, The African Jesuits AIDS Network, Pax Romana, and The International Young Catholic Students as well as with The Union of Superior Generals in the mapping of what monks and nuns do globally in the field of AIDS, and that is one million people totally. Through annual visits to the Vatican and a very good collaboration between my Director Dr Peter Piot and the Nuncio in Geneva, Archbishop Tomasi, we also work with the Vatican.

There is a small percentage of issues related to AIDS where both UNAIDS and Vatican Officials recognize that we have different opinions. But neither partner sees those differences being so big



that we can not collaborate in the vast field of issues where we agree. The Vatican is an ally in many respects, and The Nuncios working with various UN Agencies have helped tremendously for example to get the prices of medicines down, so they can reach more people in need.

Churches have been in the forefront of the HIV pandemic since the first man or woman with AIDS walked into a Christian health care facility. Churches have since then taken care of, and cared for, millions of sick and dying people, and their families. Since we first got the HIV antibody test, Churches have given counseling to people who are HIV positive. Churches were the first to care for all the orphans who had seen their parents die of AIDS. Even before secular organizations came into the field of AIDS education, many churches thought about adapting prevention messages so they would be more effective,

I think that, without being too proud or exaggerating, we can say that our Church, being the biggest single health care provider in the world, as well as being an important provider of education, has carried out most of above. After all, Cardinal Lozano has several times stated that The Church carries out around 25% of global health care.

But all of above has not been fully understood, or recognized, by the secular world. Rest assured that this now is changing and that more and more people in the UN and elsewhere see the important work of churches, and is increasingly willing to collaborate with churches.

I think that it is important to underline that our collaboration with Caritas Internationalis is a very extensive one and that Father Bob Vitillo, who is its representative in Geneva and in that role, has been involved in most of the major issues we have discussed lately. One very good example is the elaboration of UNAIDS Prevention Paper, where Father Vitillo gave precious advise which gave as a result that the paper sees prevention as holistic and that it does not emphasize one prevention method over an other. Father Vitillo has also been part of a group discussion how to scale up access to ARV treatment, and was instrumental in broadening the scope of the discussion for it to become one on Universal Access. This concept of Universal Access is an evolving one and now includes access to prevention, to counseling, to various form of care and to stigma eradication. Fortunately UNAIDS collaboration with The Church goes beyond Father Vitillo and I am glad that my colleagues asked me to find a woman who could join the Global Women's Coalition on AIDS and be present during a meeting in Toronto in June. Sister Maria Martinelli from the Secretariat of the Union of Superior Generals will join this group and present at that meeting. The reason I mention this is not that I am satisfied with it. Personally I would like to see more and closer collaboration between us and The Church. The reason I mention this is because we in UNAIDS get excellent input on moral authority and knowledge about what is really happening out in all the Catholic health care facilities far out in the field. And we need both sorely when we sit in our offices in Geneva.



As you well know AIDS represents the biggest pandemic mankind has ever experienced. Nothing that we know of before has this dimension. It will change the world, and if we only look at Africa, I am certain that it will change that continent more than colonialism, more than slave trade.

Around 60 million people have so far been infected with HIV, the virus causing the immune system to collapse so people get AIDS.

Around 20 million of them are already dead. The Anglican Bishop Beetge of the Highveld Diocese in South Africa told me that they no longer can carry out individual funerals. Saturday has been set off for mass funerals.

If we look at the worst hit countries, Botswana and Swaziland, we find that more or less 40% of the population between 15 and 49 years of age are infected with HIV.

In Lesotho 30% and in Kenya around 7% are HIV positive.

Going to the Americas we see that in Honduras around 2 % has HIV, and in Brazil just 1%.

In Asia; Cambodia has more or less 2, 5 % of its population between 15 and 49 being HIV infected, India perhaps 1 % and Thailand 1.5. And yet in some states in India, the infection rate is much higher.

As we can see and as we know, Africa is the hardest hit continent, and unfortunately there is nothing indicating that it can not be as bad elsewhere.

Now we have about 40 million people living with HIV. And yet, only about 48% of students in low and middle income countries get any education in schools on HIV and AIDS at all.

In Sub Saharan Africa only around 8% of the pregnant women who have HIV are offered medicines to prevent transmission to the child.

As your colleagues in some African countries know painfully well, the impact of this pandemic is tremendous. Scores of thousands of children are orphaned by AIDS, they either are taken care of by the extended family, which in Africa now is dysfunctional due to the sheer numbers, or they try to keep the family together in child-headed households, or they migrate to cities and become street children.

The burden on women is especially heavy; as you know a woman gets easier infected than a man because of both biological and social reasons, and the women are the ones that care for all sick and all children, and sometimes need to work to get food. A widowed woman in many cultures becomes for longer or shorter times the sexual object of the deceased husband's family.



In order to replace the number of teachers who have died of AIDS-related illnesses, some countries have cut the curriculum to educate teachers by 50% and other educational institutions are threatened as well. This because so many teachers, nurses and other professionals die of AIDS. One can easily understand what this will lead to.

20 years into the world's most severe pandemic one would think that there would be strong signs of global solidarity. Well, from my perspective, there are not many. I see few labor unions rally to help their colleagues in Africa; I see few parliamentarians doing the same; I see few youth or women's organization reaching out to their colleagues.

Worst off, I see few churches in the North even trying to take time to think about what it means to be a Christian in Africa today. The Body of Christ in Africa is suffering and the same Body of Christ in the North does not feel the pain. There is something terribly wrong here.

Recently I talked to 28 Norwegian church leaders, reminding them that some years ago UNAIDS and the Norwegian Church Aid invited six of them to go Africa to reach out to churches leaders there and say "You suffer – how can I help?" One, just one, had the time to go. The 28 church leaders in Norway still maintained that they have too much to do and too little time to consecrate on AIDS related issues. And in any case they said "What can we do?" And his in spite of the fact that I had just told them to reach out to their brothers and sisters.

So with this my reality; why am I here? I am here because two Popes have spoken up loudly and clearly on the issue of stigma and discrimination of people living with HIV. I am here because you are, or can be, extremely important actors and collaborators. Many of you and many of your colleagues treat people with HIV and teach, care and pray. Your organization can help us to increase work on stigma- eradication. Stigma and discrimination of people with HIV is unjust, and according to many churches "a sin and against the will of God". You as individuals can get increasingly involved, because you have brothers and sisters out in the midst of this pandemic. I am here because the more we in the UN collaborate with organizations like, the more coherent we will all be and the faster we can reach out to all those in need.

I am also here because to me AIDS is a relational issue. AIDS is about what we do to each other, whether that is by having sexual relations or not, or by giving the needy adequate education or not, or by giving necessary medication or letting people die or the unborn become infected.

AIDS is also about taking time to care, educate and to pray.

As a relational issue, AIDS is about morals. "*La morale, c'est l'art de vivre*" said Dominican Father Philippe Verdin recently on a French Catholic TV station. I think he is right and I think religious and religion can help us to sharpen the morals we need. The Catholic Church's social and moral



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teachings can easily be read with AIDS as a backdrop. And I think that there is an urgency to do so.

So I am here for all of above, but also because we in UNAIDS need your help. The Catholic Church can help us eradicating stigma and discrimination of those who are HIV infected. Not only is such discrimination an injustice, as two Popes have pointed out, but such discrimination has as result that people do not get tested for HIV. Thus they do not know if they have the virus or not, and they continue to spread the virus and give birth to equally infected children, and they do not get medication, thus they get ill and die.

As the mapping of all the activities done by monks and nuns unfolds, we will discover how much Catholic doctors that are nuns and monks are doing and we also see that people who have HIV are close to the Church and get support from her. More is needed, more can be done, and together we can do it.

Here I thank you for your attention so far and we can perhaps take some time for a discussion?