

**STATEMENT BY MR. YASHWANT SINGH, MINISTER OF EXTERNAL AFFAIRS
ON HIGH LEVEL PLENARY MEETING OF THE GENERAL ASSEMBLY ON THE
FOLLOWUP TO THE OUTCOME OF THE TWENTY-SIXTH SPECIAL SESSION AND
THE IMPLEMENTATION OF THE DECLARATION OF COMMITMENT OF
HIV/AIDS AT THE 58TH SESSION OF THE UN GENERAL ASSEMBLY ON
SEPTEMBER 22, 2003**

Mr. President,

I am happy to represent India in this meeting. It is appropriate that this high-level meeting of the Plenary at the beginning of the 58th session of the General Assembly should consider a subject which, quite justifiably, has become not only an overriding concern for the entire international community but also a serious humanitarian crisis.

Mr. President,

2. India strongly supports the "Declaration of Commitment on HIV/AIDS" adopted at the twenty-sixth special session of the General Assembly. We welcome the recent efforts of the G-8 to address effectively the urgency and gravity of the HIV/AIDS epidemic. At the same time, we would like to express grave concern over the fact that the HIV/AIDS epidemic remains a global emergency, undermining social and economic development throughout the world, particularly in developing countries.

3. The UNGA Special Session of 2001 set for the year of 2003 certain time-bound targets relating to the establishment of an enabling policy environment. Let me share with you some of the steps India has initiated with the aim of strengthening political advocacy and implementing a multi-pronged strategy for dealing with the problem of HIV/AIDS.

4. A year and a half ago, our Prime Minister launched a Parliamentary Forum cutting across political lines on HIV/AIDS prevention. A national convention of this Forum was convened earlier this year involving elected representatives from across the country with a view to translating the consensus at national level to action at the grassroots level. This convention was inaugurated by the Prime Minister. The

Declaration of Commitment on HIV/AIDS was endorsed by all major political parties. Such political commitment at the highest levels alone can ensure the development of multi-sectoral HIV/AIDS strategies and their integration into mainstream development planning.

5. A comprehensive National Aids Control Programme is in place in India, covering the entire length and breadth of the country. This Programme seeks to put in place a wide range of preventive programmes as well as those on care, support and treatment; access to information, education and services; strengthened anti-discrimination units and human rights protection for HIV infected people.

6. Protection of the rights of the HIV/AIDS infected population is an important responsibility, which we acknowledge and seek to address. We are determined to protect the vulnerable, ensure non-discrimination, enhance provision of health care and secure access to socio-economic rights. The National Programme on AIDS includes campaigns to eliminate the stigma and discrimination faced by HIV positive people. Voluntary counselling and confidential testing centres have been established to provide social and psychological support to HIV patients. Our approach to counselling is non-coercive, cost-effective and inclusive. Special emphasis has been placed on the right to privacy of individuals vulnerable to HIV. The empowerment of women through sensitization and education is also seen as an essential part of reducing their vulnerability to HIV.

7. The agreement reached on public health related issues, in particular on access to affordable medicines to combat epidemics is a welcome and positive step. Such access for people in developing countries is amongst the most effective elements of public health policy aimed at reducing mortality and infection rates of scourges such as HIV/AIDS. We are, indeed, gratified that Indian pharmaceutical companies are producing anti-retroviral AIDS drugs at relatively affordable prices.

8. There is need for accelerated efforts to step up medical research in the field of HIV/AIDS. Governments should lead from the front in this regard and not leave the responsibility entirely to the private sector. The international community should also pool its technical expertise and resources for this purpose.

Mr. President,

9. It is evident that political intervention and the adoption of national strategies, while essential, do not by themselves ensure the achievement of the impact targets which we have established for 2005 and 2010. While the primary responsibility for dealing with AIDS rests with national governments, we believe there is greater need for international solidarity and burden sharing. The Declaration of Commitment on HIV/AIDS adopted by the special session of the General Assembly represents a global compact bringing together all member states – the developing and the developed. The challenge of mobilizing resources is immense and increased national spending by developing countries should be accompanied by an augmentation of international

assistance. We should also look at innovative mechanisms, such as the idea of the Tobin Tax. A tax on short term investments, with the aim of reigning it back would encourage more long term investments while also augmenting resources which could be used in areas such as the fight against disease.

Mr. President,

10. We believe that the creation of a Global Fund for AIDS, TB and Malaria (GFATM) has been a significant development. India was a member of the Transitional Working Group, which led to the creation of the Fund. We hope to see increased commitment and resolve by the donor community so that the Fund can live up to its promise.

11. It would be worth recalling that the UNGA Special Session expressed the resolve to reach an overall target of annual expenditure of between US \$ 7-10 billion in developing countries through national budgets and contributions from the donor community by the year 2005. While a wide array of strategies is required to forge a multi-sectoral response, the crux remains the need for implementation of commitments by both developed and developing countries. We hope that neither side will be found wanting.

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