

**MAPUTO DECLARATION ON HIV/AIDS,
TUBERCULOSIS, MALARIA AND OTHER
RELATED INFECTIOUS DISEASES**

We, the Heads of State and Government of the African Union, meeting at the Second Ordinary Session of our Assembly in Maputo, Mozambique, 10 -12 July 2003, devoted a special session to review and debate the current status of the HIV/AIDS, Tuberculosis (TB), Malaria and Other Related Infectious Diseases (ORID) in our continent. We held a Video Conference with relevant experts and international agencies concerned with the prevention and fight against these diseases, to exchange views and discuss further concrete actions which should be taken to curtail their spread in our countries;

We remain deeply concerned about the continuing spread of HIV/AIDS, TB, Malaria and ORID, despite the efforts that member states have exerted to operationalise the commitments made at the Abuja Summits on Roll Back Malaria (April 2000) and on HIV/AIDS, TB and ORID (April 2001);

We commend the role being played by the African Union (AU), in collaboration with UNAIDS and its co-sponsoring UN Agencies, the ECA and other international institutions in coordinating and monitoring the implementation of these Declarations and Plans of Action. We urge that these efforts be further developed and strengthened until the scourges are brought under effective control;

We have analysed the progress achieved so far in prevention and fight against HIV/AIDS, TB, Malaria and ORID, which are the major causes of morbidity and mortality and constrain the socio-economic development of our region, accentuating poverty, disrupting family and social fabric and putting millions of our people in despair. We acknowledge the successes achieved in some sub-regions in reducing HIV incidence. We note that this was possible because of political commitment, resource mobilization, collective social action and a high level of awareness among our citizens in face of these threats. We urge that these positive steps and measures be intensified in all our states to achieve greater success against these diseases;

We note that the majority of those infected with and affected by HIV/AIDS in our continent are women, children and young people; especially the poor who have limited access to effective care and support. This reflects their vulnerability particularly in societies marked by gender inequality, where the burden of care for the sick and for the children orphaned by AIDS falls overwhelmingly on women. In this connection, we recognise the need to redouble efforts in giving particular attention to women and young people's participation and access to information, life skills and services;

We also recognise the inclusion of the HIV/AIDS as a cross-cutting issue in the New Partnership of Africa's Development (NEPAD), and the establishment of other initiatives such as AIDS Watch Africa (AWA), the Commission for HIV/AIDS and Governance in Africa (CHGA) and the Millennium Development Goals, all of which represent milestones of progress in the fight against HIV/AIDS. We acknowledge the progress made in some of our countries in mainstreaming HIV/AIDS into relevant development frameworks such as Poverty Reduction Strategies Papers (PRSPs). We urge that these efforts be sustained, strengthened and extended to all countries;

We note that many Member States have mobilized internal resources and taken bold leadership steps to confront HIV/AIDS and other health challenges. We also acknowledge the response by the international community to the efforts to combat HIV/AIDS, TB, Malaria and ORID. The establishment of the Global Fund to Fight AIDS, TB and Malaria (GFATM), provided a renewed impetus to the programmes and interventions that Member States designed to combat these diseases. However considering the gravity of the impact of these diseases which have together already been declared an emergency, we note that in a relatively short period of time the GFATM has made significant financial commitments to concrete programs to fight these diseases in Africa and disbursements are already underway. However, we underscore the need for major new and sustainable financing (3 billion US dollars by the end of 2004) for the Fund from donor nations. These will ensure that resources made available to fight the diseases rise to a new and more realistic level given the scale of the epidemics;

We recognize that health systems in our region need to be strengthened, adequately equipped and financed to provide quality and effective care against diseases and particularly against HIV/AIDS, TB, Malaria and ORID in view of their devastating effects on society;

We reaffirm our commitment to achieving the goals we set concerning health sector financing in our states and recommit ourselves to meet the target of 15% of national budget to be allocated to health. We reiterate our readiness to mobilize more internal resources for this struggle, in partnership with the private sector, civil society and all other stakeholders. We are convinced that the scaling up of health interventions for HIV/AIDS, TB, Malaria and ORID prevention, care treatment and support can significantly contribute to the overall reduction of morbidity and mortality and to the improvement of the quality of life of those infected and affected by these diseases;

We warmly welcome the recent announcement by President George W. Bush of the United States of America, to provide US dollar 15 billion within the next five years for the combating of HIV/AIDS in Africa. We express the hope that the funds will be released in due time to enable the realization of the set goals and objectives. We call on the US government to appropriate 3 billion US dollars in 2004, some of which should be allocated to the Global Fund;

We are aware that provision of quality care, support and treatment to HIV/AIDS patients are important aspects of prevention and control, and require coordination and harmonization of policies, strategies and programs to obtain maximum efficiency and cost-effectiveness. We are convinced that HIV/AIDS care, support and treatment are essential components of prevention and control and can help address the stigma and discrimination associated with this disease and thus significantly contribute to the reduction of its spread and to the survival of those infected and affected.

We recognise the urgent need to alleviate the impact of the HIV/AIDS on the lives of orphans and their long-term development prospects. In this regard, appropriate policies including legal and programmatic frameworks, as well as essential services for the most vulnerable children, should be adopted and applied at all levels. The challenge is to keep parents alive through effective treatment and prevention as a first vital step;

WE, THEREFORE, SOLEMNLY:

- 1. REAFFIRM** the commitments enshrined in the Abuja Declaration and Plan of Action on Roll Back Malaria, and the Abuja Declaration and Framework Plan of Action on HIV/AIDS, TB and ORID and

- REITERATE** our commitment to intensify and consolidate efforts for their implementation;
- 2. URGE** the international community to honour their pledges by disbursing the funds needed to fully execute the programs for prevention, care, support and treatment of HIV/AIDS, TB, Malaria and ORID, especially through the Global Fund, the World Bank Multi-country AIDS Programmes and other initiatives, including removing conditionalities associated with debt relief and others that contribute to constraining health sector spending;
 - 3. ALSO URGE** the Global Fund and recipients of its funding, to work together to develop simpler and expeditious mechanisms to ensure that these large additional financial flows are quickly and easily available to institutions in Africa that can utilize them effectively in the fight against the diseases. We further urge the Global Fund, UNAIDS family and the recipient countries to work together to ensure the realization of our common objectives;
 - 4. EXPRESS OUR DETERMINATION** to ensure that all opportunities for scaling up treatment for HIV/AIDS are pursued energetically and creatively, and in this connection, seek diverse and effective partnerships with international donors, civil society, business sector and people living with HIV/AIDS, in order to extend effective care, support and treatment to the maximum number of people, particularly women, orphaned children and others made vulnerable by HIV/AIDS, in conformity with the principles of equal access and gender equity;
 - 5. COMMIT OURSELVES** to promote partnerships with the private sector and relevant UN Specialised Agencies, pharmaceutical companies and other partners to increase local and regional capacity for production and distribution of affordable generic pharmaceuticals for the management of HIV/AIDS, TB, Malaria and ORID - the diseases with the highest impact on Africa's socio-economic development;
 - 6. RESOLVE** to continue to support the implementation of the Plan of Action for the AU Decade for African Traditional Medicine (2000 – 2010), especially research in the area of treatment for HIV/AIDS, TB, Malaria and ORID;

7. **REQUEST** the Chairperson of the AU in collaboration with UNAIDS and its joint UN Co-sponsoring Agencies, ECA and other partners, to coordinate and intensify efforts among Member States, monitor implementation of this Declaration and report regularly to our Assembly.

“WE BELIEVE THAT HIV/AIDS, TB, MALARIA AND ORID CAN, MUST AND WILL BE DEFEATED!”
