THE PCB NGO DELEGATION’S COMMUNIQUE
43rd UNAIDS PCB MEETING

DECEMBER 2018
CHAPEAU
By Marsha Martin

The UNAIDS 43rd Programme Coordinating Board (PCB) met in Geneva, Switzerland on December 11-13, 2018, chaired by the Honorable Anne Wechsberg, Director, Policy Division, Department for International Development, United Kingdom. This 43rd PCB meeting, with its very full to overflowing agenda, heightened tensions vis-à-vis the release of a report prepared by the Independent Expert Panel; the announcement by the Executive Director of his upcoming departure; and, the many reports and updates requiring actions from the Board.

The agenda items entailed into the night (and early morning) drafting room deliberations. Overall, the meeting reached consensus on every major agenda item and provided for updates on issues from previous meetings, including: the global HIV prevention agenda; the AIDS response and the challenges of sustainability; funding for community-led responses; integration of TB and HIV; access to medicines and intellectual property barriers; migration and HIV; approval of incoming officers and NGO representatives; and, a detailed report back from the Independent Expert Panel on issues of unethical workplace behavior including bullying, abuse of power and sexual harassment at the UNAIDS Secretariat. Within a very complex context and contentious agenda items, the one-day Thematic day designed to address mental health and quality of life issues for people living with HIV and key populations was shortened to a two hour debate.

Following the Executive Director’s report, the NGO Delegation presented its report addressing the HIV prevention and treatment-related trends and challenges faced by people on the move, as they seek health services, protections and safety. We called on Member States, Cosponsors and stakeholders to respect the human rights and ensure the health of people living with and affected by HIV experiencing migration in all of its forms.

The Independent Expert Panel presented its report and discussed the recommended actions. This was followed by responses and recommendations from the management and the staff association. The IEP report concluded with the need to implement immediate changes at UNAIDS, both on the existing mechanisms and process to address the issues, as well in the UNAIDS leadership. As expected, this particular agenda item elicited strong and varied reactions from Member States. During the discussion of the reports, the NGO Delegation maintained our position that UNAIDS must now do things
very differently, at headquarters and in the field, and that a renewed and strong leadership is required, especially when it comes to addressing unethical workplace behaviors, including sexual harassment, bullying, and abuse of power in UNAIDS.

Throughout the preparations leading to the 43rd PCB meeting, the NGO Delegation followed the issues raised and organized regional and global calls with civil society to solicit feedback and recommendations for the way forward. The Delegation’s representatives at the PCB Bureau actively engaged in the critical discussions, including pushing for the pre-PCB release of the IEP report.

This meeting was particularly challenging for the NGO Delegation when a Member State raised issues on the NGO Delegation’s recruitment and selection process, stalling the decision point on approval of PCB officers and incoming NGO Delegates that was normally approved without questions. As in past meetings, the NGO Delegation was very busy with many side meetings with Member States, Cosponsors and civil society observers to gain an understanding of outstanding issues and to push for key recommendations and actions for the PCB and beyond.

REPORT OF THE EXECUTIVE DIRECTOR
By Trevor Stratton

Forty years into the epidemic, Michel Sidibé, in his Executive Director’s Report, opened by highlighting some of the recent successes and accomplishments of his work over the last 6 months, such as UNAIDS’ “Live Positively - Know Your Status” campaign, World AIDS Day global events, the recent G20 Summit in Buenos Aires, the Forum on China - Africa Cooperation (FOCAC) meeting in September in Beijing, as well as the work of the Global Prevention Coalition.

While just two years ago, UNAIDS was talking about the global HIV response being “on the last mile”, the slogan extolled repeatedly at the 43rd PCB meeting was cited from the “Miles to Go” report, launched in Amsterdam. This is an important change in tone denoting the increasing challenges faced by key populations and women’s groups and their advocates for more community engagement and funding for the community response demanding, “nothing about us without us.” The last miles of “closing gaps, breaking barriers and righting injustices” have been slow in being realised.

The Delegation’s intervention highlighted the huge disparities in reaching the 90-90-90 targets in different populations and in different locations/regions and the unacceptable increases in new HIV infections in specific countries, particularly in key populations which
contribute 47% of all new infections. We also called for resourcing to match political commitment, especially for crucial and effective community-led response, funding for social enablers, human rights-based programming, and HIV prevention.

Michel’s remarks outlined these areas for collective action: prevention, accelerate towards 90-90-90 including investing 25% for prevention, 30% for community-led services, 6% for social enabling activities, more attention to mother and babies, the “testing revolution”, elimination of sexual and gender-based violence and the need for a fully funded Global Fund with sustainable transition plans in every country.

Michel also briefly touched on the report of the Independent Expert Panel and alluded to the fact that the 2019 June PCB meeting would be his last. The Management Response to the IEP Report was deferred to be discussed during Agenda item 3.

**THE NGO REPORT: PEOPLE ON THE MOVE: THE KEY TO ENDING AIDS**

*By Marsha Martin*

Building upon themes and topics in the previous NGO reports examining challenges to ending AIDS by 2030, this year’s report sought to make visible and identify the needs of a vulnerable and left-behind population: people on the move. The NGO report highlighted current trends in global population mobility: increasing diversity and complexity of human mobility; “feminization of migration”; new health paradigms; new approaches to thinking about mobility; and challenges to globalization of migration. The report also brought forward the voices and lived experiences of those on the move, living with HIV, at risk for HIV transmission and other co-morbidities. The report concludes with 12 good practices and a set of recommendations – which, if taken together, can address the needs of people on the move living with HIV.

The recommendations range from the need for the development of a common data framework, the need for a comprehensive definition of migrant and people on the move; and the need for a long-lasting commitment to provision of a basic set of HIV prevention, treatment and support services for people on the move, across international borders and within countries.

After a powerful and very personal presentation delivered by Valeriia Rachynska, Europe NGO Delegate from Ukraine, herself a second generation migrant, the decision points in
the report were discussed and finalized in a drafting room that went until the early morning. When everything was completed, the NGO report’s decision points encouraged the acceptance of some defining language useful for program purposes; encouraged development of a comprehensive continuum of care for people on the move; outlined support for international collaboration across borders, including with between the Joint Programme and the International Organization on Migration (IOM). The final decision points are [here](#).

**REPORT OF THE INDEPENDENT EXPERT PANEL AND THE RESPONSES BY THE MANAGEMENT AND THE UNAIDS SECRETARIAT STAFF ASSOCIATION (USSA)**

By Alessandra Nilo

The 43rd PCB was one of the most challenging PCB meetings in recent times. The Independent Expert Panel (IEP) Report has cast serious doubts on UNAIDS’ management and systems on preventing and responding to harassment, including sexual harassment, bullying and abuse of power at UNAIDS Secretariat. The IEP Report clearly pointed out that new leadership would be required to implement the series of proposed changes. To complete the picture, the Statement of the UNAIDS Secretariat Staff Association also raised serious issues in the conduct of proceedings internally within UNAIDS, some of which have been raised as far back as 2011. The response rate to the staff survey was exceptionally high at 78% with more than 60% of people within the Secretariat showing lack of confidence in current leadership to implement the management response effectively.

However, even in the face of the evidence pointed out, the Management Response to the IEP suggested that the necessary changes would be conducted by the current leadership of UNAIDS. This statement created issues and concerns from all sides, that took over not only behind the scenes, but also the official agenda of the PCB debates. The thematic session on Mental Health and HIV, for instance, was seriously hampered, and the negotiations to define Decision Points on Agenda 3 were the longest in the history of PCB meetings.

Unfortunately, the debate became more on the leader than on leadership. Political negotiations were complex and tense between the proposals for the immediate end of the Executive Director’s mandate and the countries pushing for him to continue. The middle
way was to think about how to start immediately the process of hiring the new Executive Director (this DP was soon approved at the beginning of the PCB) and try to ensure a less turbulent transition. While Michel Sidibe mentioned in his closing speech that he was stepping down by end of June 2019, it is still unclear how the transition period leading to that will take shape, especially with a special PCB session being called for in March. Also agreed on was the need to create a PCB working group to oversee the immediate implementation of the management response and to further review the conclusions and recommendations contained in the IEP report, and the management response. Another key resolution was to convene a special PCB session in March 2019, which would also decide whether to take forward specific recommendations to the UN Secretary General.

In that stressful environment, it was important to count on the statements of the observer NGOs who mostly aligned themselves with the main points raised by the NGO Delegation: a) zero tolerance against any kind of harassment, including sexual harassment; bullying and abuse of power at UNAIDS; b) the unconditional defense that, faced with current challenges, the best response is to create the necessary conditions to strengthen UNAIDS; and c) an understanding that it is necessary to reframe this challenge, turning it into an opportunity to once again have UNAIDS set the example for the entire UN system.

The mention of girls and young women at the 43rd PCB would remind me I was among kindred. It was my second time at the PCB and this time, I was not a speaker, but an Incoming Africa Delegate. Any expectations I had were too little, for this was trial by fire. It will probably be the PCB I will never forget, probably we all who were present will never forget.

I saw the PCB become human and I felt UNAIDS becoming. Change is tough, painful and great and I was changing with it all. It felt like too much pressure at some point and I knew if it felt this hard for me, it was way harder for others. We can only achieve a diamond when pressure is at its peak. The diamond that is a stronger UNAIDS has taken shape. Girls and young women, the future is brighter for us, safer and ready for us. At the community level or at the global spaces, we are not just part of the menu, we are seated at the decision making tables.

- Lucy Wanjiku, Positive Young Women Voices (PYWV), incoming Africa Delegate

FOLLOW UP TO THE 42ND THEMATIC SEGMENT ON ENDING TUBERCULOSIS (TB) AND AIDS

By Sonal Mehta

The thematic segment of the 42nd PCB Meeting in June 2018 was devoted to the joint response to Ending Tuberculosis (TB) and AIDS. Presentations and discussions included empirical evidence and analysis of these interlinked epidemics and responses, accounts of successful activities and programmes, and proposed actions for further integration. The NGO Delegation was actively engaged throughout the process to ensure that the background documents and the Thematic day agenda included all the important issues we wanted to raise, as well as key civil society and community representatives as speakers/presenters. The NGO Delegation, along with its Thematic Civil Society Advisory
Group, had agreed on objectives for the meeting, with the intent of ensuring that the decision points emanating from the session would be reflective of critical actions needed.

The Thematic session at the last PCB was quite an effective session. The working group members were also represented in the UN High Level Session on TB in September 2018. Interestingly, the decision points of the thematic were quite strong. All Member States, cosponsors and the NGO Delegation showed commitment and solidarity in ensuring that all the decisions points were actionable, including improved multisectoral approaches and integration between TB and HIV; investment in research and health technologies; and, better engagement of the communities. Details of Decision Points can be accessed here.

REPORT ON THE WAY FORWARD TO SUSTAINABLE AIDS RESULTS
By Musah Lumumbah

At the 43rd PCB meeting, we were reminded that Ending AIDS by 2030 as a public health threat was one of the targets of SDG 3 (Health and Well-being for all at all ages). As such, bringing the epidemic under control is a prerequisite for the long-term sustainability of the AIDS response. Complacency carries a heavy price at this point in the epidemic. If new HIV infections are not drastically reduced soon, especially in population hot spots and regions left behind – West and Central Africa, Eastern Europe and Central Asia - the number of people requiring antiretroviral therapy will increase. Complacency about the need to accelerate equitable AIDS responses leads to increased health spending pressures for everyone especially communities, governments, and donors.

Poorly planned and executed transitions from international assistance in some countries have already badly compromised the AIDS response. In EECA and Asia region, for
instance, this has been most sharply felt amongst Key Populations including people who inject drugs, sex workers, MSM, transgender people and people on the move. AIDS remains the leading cause of death among women of reproductive age and the leading cause of death in Africa—including among young people, a rapidly expanding demographic. The NGO Delegation appreciated the background document prepared by UNAIDS that included community responses within the framework of sustainability and agreed with the suggestion of UNAIDS to set up a joint working group globally to develop and monitor sustainable responses for HIV.

The NGO Delegation called for increased participation and leadership of civil society and communities in the planning, implementation and monitoring of sustainability processes especially transitions of AIDS’ resource from donor to domestic financing and the development of investment cases.

ANNUAL PROGRESS REPORT ON HIV PREVENTION 2020

By Sonal Mehta

The 2016 Political Declaration on Ending AIDS provides the overarching framework for taking forward HIV responses and monitoring progress. The Political Declaration set the ambitious impact target of reducing the annual number of new HIV infections globally to under 500,000 by 2020. Accompanied by global programmatic prevention targets, the Political Declaration set out to reach 90% of key populations and 90% of adolescent girls and young women (in settings with high HIV prevalence) with combination HIV prevention programmes.

At its 41st meeting, the Board was briefed on and took note of the HIV Prevention 2020 Road Map, as launched at the inaugural meeting of the Global HIV Prevention Coalition on 10–11 October 2017. The PCB also requested the Joint Programme to report back annually on progress made on HIV prevention. Since the launch of the Coalition, participating countries, with the support of the Joint Programme, have engaged in a wide range of activities towards the implementation of the Road Map. Many of these were described in the Coalition’s first progress report, published in May 2018.

At the 43rd PCB meeting, Alvaro Bermejo, Co-Chair of the Prevention Coalition provided an update on the Coalition. It was clear that there was progress in the ten country
members, including an increase in political commitment. However, there was slow progress in resources for prevention in a few countries and there was a slow reduction in new infections. A few Member States complained that it was not easy to become a member of the Coalition and asked that the Coalition be made open and easy to join.

Apart from the Prevention Coalition, there were serious concerns about financial investment, political commitment and community engagement in prevention. The Joint Programme was criticised for not being more firm in making Member States accountable and increasing their political commitment for prevention in an attempt not to leave anyone behind. Considering the urgency of the PCB agenda item on issues of harassment including sexual harassment and abuse of power, the decision points for this issue were not comprehensively discussed.

The NGO Delegation wants future PCBs to show more commitment to prevention issues and for us to have a keen role to ensure that it gets the importance it deserves within and beyond the PCB meetings.

REPORT ON UPDATE ON ACCESS COMPONENTS OF THE UNAIDS 2016 - 2021 STRATEGY: REMOVING ACCESS BARRIERS TO HEALTH TECHNOLOGIES FOR HIV AND ITS CO-INFECTIONS AND CO-MORBIDITIES IN LOW AND MIDDLE INCOME COUNTRIES

By Aditia Taslim Lim

A stronger UNAIDS was the core message of the NGO Delegation in the 43rd PCB meeting, as well as in this particular agenda item. Barriers to health technologies including intellectual property have long become one of the most challenging issues faced by communities and people living with HIV to ensure access to affordable and uninterrupted life-saving medicines. Trade agreements between multiple countries of the trademarked medication continue to threaten public health rather than safeguard it. These include data exclusivity, extended patent monopolies, and often non-transparent processes that prevent low- and middle-income countries to significantly reduce the price of medicines, even through the TRIPS Flexibilities mechanism.

While these barriers remain a challenge, it is concerning to find that UNAIDS Secretariat, does not currently have a focal point in addressing these challenges. Even in the area of
drug pricing, UNAIDS has not pushed forward an agenda inclusive of issues facing all Member States.

Today, various forms of national populism are sweeping the globe like an epidemic, attacks on multilateralism are escalating, and political and financial instability are leaving many people behind. It is therefore imperative that UNAIDS restores its expertise and play a role in convening key actors and stakeholders in the HIV response to continue to discuss and address critical challenges and opportunities related to access to medicines and intellectual property-related issues. It must translate commitment into concrete actions and support countries to implement TRIPS flexibilities as a safeguard and for the benefit of people living with HIV. As the NGO Delegation, we emphasized at the PCB meeting that our health is not for profit.

This was my first PCB: I was a bit lost. I came to some understanding of what the NGO delegation can bring to the PCB. As Civil Society delegates, we represent different key populations across our regions. Within the past three decades of HIV, we have seen the same key populations left out of meaningful discussions and positions of power: people living with HIV, sex workers, people of trans experience, LGBT communities, women and young girls, Black and Brown people, people who use drugs and migrants. Some of this is about data; some of this is about stigma and discrimination, including lack of political will of providing such inclusions.

The People on the Move NGO Report was important at this session. I am one such “person on the move” - my family are refugees. In my own life, I’ve moved from city to city, for opportunities like education or employment, and sometimes running from a bad situation. People move for many reasons. The NGO report focused on migrants - or “people on the move” (a phrase we heard over and over throughout the meeting) - and the particular ways that migration (in all its multiple meanings) impacts health and HIV vulnerability. Migration is a “hot topic” in any discussion in today’s rapidly populist and nativist political climates: the US People living with HIV Caucus has been fighting for two years against anti-immigrant and anti-migrant policies and media in the US context. At the NGO Report presentation on People on the Move, I felt like I had found a place with the NGO delegation.

- Andrew Spieldenner, United States People Living with HIV (US PLHIV) Caucus, Incoming Delegate, North America
REPORT ON THE BEST PRACTICES ON EFFECTIVE FUNDING OF COMMUNITY-LED HIV RESPONSES
By Devanand Milton

In this agenda item, the NGO Delegation highlighted two important messages: 1) the commitment in fulfilling the 30% community-led HIV services and the allocation of a minimum 6% on social enabling activities in the 2016 Political Declaration; and 2) removal of structural barriers for community-led organisations in the AIDS response.

The Delegation noted that it was not clear how funding allocations were accounted for. There is no clear accounting mechanism in place to track the spending. HIV funding for community-led organizations should be disaggregated further to track investment in organizations that are led by people living with HIV, women, young people and key populations. References were made to the Global AIDS Monitoring (GAM) and National AIDS Spending Assessment (NASA) tools but these are not utilized effectively to track spending. Also the terminologies used, i.e., “community-led AIDS response and social enablers” need to be thoroughly defined.

A declining funding for civil society will tremendously affect the services provided by community-led AIDS responses. Additionally, political and legal barriers including criminalization of same-sex relations, sex work, and drug use also impede registration of key population-led organizations. The good practices highlighted in the report include social contracting mechanisms between government and civil society. This model may not work for all countries where punitive laws criminalise Key Populations. In these cases, fund allocation decisions are reliant on cabinet officials which are often not transparent and not accessible to communities.

Community-led AIDS responses will play a key role in meeting the SDG goal of ending the AIDS epidemic. Funding for the communities and social enablers are critically important to provide services to the people who need them most and to ensure that no one is left behind in the AIDS response. Finally, more effective and consistent monitoring of funding allocation will result in more robust understanding of where dollars are going and which communities are actually being served.
Since 2001, Women’s Health in Women’s Hands has been advocating for the inclusion of migrant and mobile populations in global agreements at the United Nations with limited success. When I was interviewed as part of the consultations for the 2018 NGO Delegation report on people on the move, I realized this was a major opportunity to make a difference from the inside. The 43rd PCB meeting was going to be a critical time when one of the key populations that’s being left behind in the 90-90-90 strategy would be discussed and recommendations for strategic action proposed and adopted. I was successful in my application to be one of the incoming North American NGO delegates. At the meeting in Geneva, I met other NGO delegates from around the world who were passionate about HIV and mobility issues and had invested in the NGO report and its recommendations.

The presentation of the report, the ensuing discussions, and interventions from the floor were passionate, critical and as varied as the people giving them. Drafting of the decision points went far into the night, but when all was said and done, the results did not disappoint and the Member States adopted them without a lot of fanfare. For me, this was the fulfillment of a long-term goal to see the inclusion of migrant and mobile populations in a global HIV dialogue. The report and decisions adopted have provided those who work with migrant and mobile populations, a platform on which to base local, national and international responses. I could not have been more gratified!

I also joined the PCB at a time when UNAIDS’ credibility and reputation were in question due to accusations of sexual harassment, bullying, and abuse of power and the mishandling of the issue by senior management. This item dominated the meeting and it was difficult to see how a consensus would be reached when PCB Members and observers were so divided on how to handle the recommendations provided in the Independent Expert Panel (IEP) report. However, the understanding that whatever decisions were made needed to demonstrate a firm commitment to the protection of staff, as well as the need to leave behind a strengthened UNAIDS for the sake of the millions of lives at stake across the world, brought differing voices to a hard-fought consensus. The interplay of power, politics, gender, cultural and racial dynamics that have plagued the HIV response since the beginning were at play throughout the discussions of this item. However, these are also the factors that motivate and energize those who were present and other advocates and supporters around the world to sustain an effective response for all key populations.

I look forward to future PCB meetings with a lot of anticipation.

- Wangari Tharao, Women’s Health in Women’s Hands, incoming North America Delegate

THEMATIC SEGMENT: MENTAL HEALTH AND HIV/AIDS - PROMOTING HUMAN RIGHTS, AND INTEGRATED AND PERSON-CENTERED APPROACH TO IMPROVING ART ADHERENCE, WELL-BEING AND QUALITY OF LIFE

By Ferenc Bagyinzsky

The Thematic day of the 43rd PCB covered the topic of mental health and HIV/AIDS. The NGO Delegation supported this topic, especially with the addition of well-being and quality of life to the discussions. Both mental health and quality of life of people living with and affected by HIV/AIDS are often overlooked issues in the HIV/AIDS responses, where targets and indicators are set to measure the level of access to prevention, care and treatment services, while other aspects such as stigma and discrimination are more difficult to measure and often ignored, similar to the
The NGO Delegation’s Thematic working group took part in the preparations. Backed by our civil society advisory group members, we contributed to the thematic background paper, good practice, case studies, and by bringing voices of the community and civil society representatives for the session. We were happy to see that all sessions had at least one community speaker from different key affected populations and people living with HIV, as personal lived experiences support the understanding of the needs of communities and help shape the responses and adjust or change policies and legislations.

Unfortunately, the day did not go quite as well as it could have, based on the immense planning and work that was put into it both by the members of the PCB working group and also the excellent speakers that prepared for the event. Some of them only travelled to Geneva to influence – via their interventions and presentations - the future of the HIV/AIDS responses addressing mental health, quality of life and well-being of people living with and affected by HIV/AIDS.

The day was cut short due to the ongoing parallel drafting rooms where PCB decision points were being negotiated, so speakers were requested to speak shorter and comments and questions were also limited, thus making a usually vibrant and exciting thematic day into one that was not beneficial for anyone’s well-being, mental health and quality of life.

The NGO Delegation will make sure that next year, when the related decision points are suggested and negotiated, all key points from speakers and interventions are taken into consideration. Currently, the quality of life of people living with and affected by HIV/AIDS and our mental health is not well covered by targets and policies, which result in increased prevalence of mental health conditions and suicide and a decreased quality of life. We encourage all our civil society partners to send us their planned interventions on the topic, so that the Delegation can include issues most important to communities in their work on negotiating the final decision points for this thematic day.

CIVIL SOCIETY SEAT AT THE TABLE: Questions raised at the 43rd PCB Meeting
By Ferenc Bagyinzsky

Shrinking spaces for civil society has been on the agenda of the NGO Delegation more and more prominently in the last several years, as both funding for NGOs and communities have substantially decreased and the legal environments we operate in have become more hostile globally. The Programme Coordinating Board of UNAIDS is unique in the UN system and one of the few exceptions where representatives of civil society and communities living with and affected by HIV/AIDS can participate in deliberations on decisions that shape the global AIDS response. Although not equal, that is, as non-voting
members of the Board, the NGO Delegation has a strong track record of proposing decisions and actions for the Joint Programme that resulted in programs and policies that are responding to the needs and interests of the communities we represent.

However, during the 43rd PCB meeting, one of the Member States, in their intervention under Agenda item 10 - Election of Officers, raised issues about the autonomy and representation of civil society and communities on the Board by questioning our recruitment and selection procedures and asking for information not just on incoming NGOs, but also on the applicants. The NGO Delegation responded to the question by giving details of our thorough selection procedure, as well as relevant information on the call for applications. As the day was drawing to a close, the discussion was postponed for the following day. Curiously, on the first day this question was raised, no Member State spoke in support of the NGO Delegation.

When the same agenda item was tabled the next day, several Member States such as Mexico, Portugal (and its constituencies Belgium, Luxembourg and the Netherlands), Australia, Chile, United Kingdom, USA and Sweden and UNHCR (on behalf of the Cosponsors) intervened and expressed their appreciation towards the NGO Delegation’s role and work on the Board. Most importantly, they supported our independent process of choosing our representatives. Some also expressed that our selection procedure is excellent and could serve as an example for other international bodies. The discussion ended up in the approval of new officers, including the incoming Delegates, but the message was clear: this challenge on community and civil society representation and participation in the UNAIDS PCB would be raised in future meetings.

Earlier in the day, the same member state circulated a proposal to open up the ECOSOC resolution that set up the PCB, including the five seats for NGO representatives. Although the reasoning for renegotiating the composition of the PCB was to give stronger presence to regions that have the largest epidemics, they were also asking for a countries-driven
board, which in combination with their intervention, seems to be a way to ease communities and civil society out of the PCB. Interestingly, the same question of selection and representation at the PCB can be posed to Member States, especially in regions where no rotation happens and the membership hardly changes.

Whether these moves were a direct attack on communities or we were indirectly being used so that others could gain more influence on the Board when it comes to voting, is yet to be found out. What was originally a procedural approval of incoming NGO Delegates became a political challenge. This development entails that the 2019 NGO Delegates continue to exercise due diligence, as well as vigilance, in order to protect its space and seat at the PCB table.

The 43rd PCB meeting is the first I have ever attended and it felt like a trial by fire. As an incoming alternate European NGO delegate, I was struck by the highly politicised environment in which the NGO delegation does its work: overseeing the Joint UN Programme on HIV and AIDS and representing the interests of millions of people living with or affected by HIV.

I was equally impressed by the seamless cooperation between the delegates (new and old) from all over the globe with the support from the Communication and Consultation Facility (CCF) influencing important decision points by the Board on issues like mobile populations and their vulnerability to HIV and pushing the agenda on access to medication for middle and low income countries ahead.

Given the fact that migration is a very sensitive issue in many countries, it was quite an achievement to reach consensus on decision points about the needs of mobile populations and migrants to adequate and quality HIV care and calling on Member States to collect data about mobile populations and HIV.

As a newly appointed NGO Delegate, I realise that the outgoing delegates left big shoes to fill. I will work hard to represent my constituency of European NGOs and stay in close contact with them and continue the important work of keeping UNAIDS as the vital organisation the world needs to fight HIV and AIDS and to work in the best interests of people living with and affected by HIV AIDS. With the continued shrinking space for civil society, the NGO Delegation must be vigilant to not let the voice of the communities be pushed out of the UNAIDS PCB.

- Alexander Pastoors, HIV Vereniging Nederland, incoming Europe Delegate
In the pre-PCB meetings, the Delegation meets with Member States who sometimes come as a full constituency or as individual countries with a number of delegates and Geneva Mission staff. Yet the Delegation, with 10 people, conducts diplomacy across all 22 Member States, the Secretariat, and all co-sponsors, while all the time keeping in consultation with civil society constituencies on five continents. It’s an incredible feat, but also must lead to some level of inefficiencies. Unless, lead-up work plays a better role in support of the actual PCB meeting week.

Unsure of the style for reflection and mindful of my 300 words, my reflections encompass, firstly, the intense scope of what the NGO Delegation attempts to cover:

Shocked at the disrespect shown by the PCB towards speakers and topic of mental health. Session should have been moved to the next PCB in June. Instead a dog-whistle signal was sent to the world over the lack of importance of mental health in HIV.

Shocked too at the behaviour of some members of the PCB. Over three years of attending, I’ve never seen the kind of politicking that is coming to characterise the rest of the UN.

Shocked as well, not by member states again questioning civil society participation in PCB, but by the loud silence from the Secretariat and other Member States on the issue.

Hoping for some insight into the impact of DPs, and where the real levers of change in the response are at. Worried that civil society focus might get trapped into form over strategy. Worried that ‘key pop’ conflation with adolescent girls and young women does a disservice to both.

Excited at a professional & personal level to be working with such a group of talent, activism, and genuinely nice people.

- Jonathan Gunthorp, SRHR Africa Trust (SAT), incoming Africa Delegate

As the incoming Asia Pacific NGO Delegate, this was my first PCB meeting- and what a meeting to begin my introduction to the governance and inner workings of UNAIDS. During the meeting, what struck me in particular was how much politics drives the discussions, even as those being most political call on others to not use politics in the discussions.

I was even more impacted by the dedication of the civil society observers and NGO Delegates in ensuring transparency and that focus remained key in the HIV and AIDS response and in holding Member States to account in their responsibility to their most marginalised constituents.

As the ever-shrinking spaces for civil society keep closing in on key populations, we hold firm to the belief that there will be no end to AIDS without us. Meaningful responses require meaningful participation of civil society.

I was impressed by the work ethic and drive of the NGO Delegation and of the CCF in pushing important and politically sensitive decision points and outcomes for key populations and the ‘10-10-10’ in a complex and difficult environment.

And finally, I came to realise how critical the function of civil society oversight and commitment to effective governance is on UNAIDS. The structures are in place in the PCB to ensure accountability and effective operation of UNAIDS. But this can only occur when those checks and balances all play their part and critically, this includes meaningful civil society participation and an NGO Delegation effectively resourced and armed with the requisite information to do so. We all have a stake in the successful, coordinated and comprehensive global response to HIV and AIDS. In my new role in the NGO Delegation, I hope to be able to contribute, represent key populations and to keep a watchful eye on the future of a stronger, transparent and accountable UNAIDS- confident in the knowledge that the rest of the world will be watching too.

- Jules Kim - Scarlet Alliance Australian Sex Workers Association, incoming Asia-Pacific Delegate