NGO DELEGATION TO THE UNAIDS PCB: COMMUNIQUE OF THE 33rd PCB
Summary – 33rd PCB Meeting

The 33rd Programme Coordinating Board (PCB) meeting agenda covered items on the coordination of technical support, as well as the strategic use of antiretroviral medications for treatment and prevention of HIV. Discussions on the post-2015 agenda were also prominent throughout the Board meeting. Through collaborating with other Civil Society groups globally in a call for a High Level Meeting (HLM), the Delegation was able to lead on negotiations that successfully resulted in the PCB inviting the United Nations General Assembly to consider convening a High Level Meeting on HIV at an appropriate time after 2015, to help ensure accountability towards the achievement of universal access to HIV prevention, treatment, care and support in the post-2015 era. A one day thematic session focussed on HIV, Youth and Adolescents was also held.

The delegation faced vocal criticisms from a small number of Member States in relation to the right of the Delegation to bring Decision Points to the meeting and the quality and validity of the research in the NGO Report. Nevertheless, a majority of Member States voiced their strong support for the Delegation’s important contribution to discussions at the PCB, the success of its work and its watchdog role.

The NGO Delegation demonstrated and reinforced its constant commitment to the critical role of civil society in responses to HIV and AIDS, human rights, and universal access to HIV prevention, treatment, care and support. The Delegation was successful in introducing and securing language throughout decision points endorsed by the PCB that explicitly included women and girls, key populations and transgendered persons. The NGO Delegation’s interventions and annual NGO Report led to spirited discussion among the Board and expanded the decisions.

The Delegation would like to give particular and significant recognition to the Youth representatives and leaders who spoke effectively and powerfully on issues facing young people and adolescents but who also presented solutions and remedies to such challenges.

The Delegation welcomed four new delegates, attending the 33rd PCB as part of an orientation process. The Delegation will be joined by Kenly Sikwese representing Africa, Laurel Sprague representing North America, Yolanda Simon representing Latin America and the Caribbean and Khartini Slamah representing Asia and the Pacific.

At the same time the Delegation said farewell to 3 delegates at the end of their term – Mabel Bianco, Jane Bruning and Ebony Johnson. Mabel, Jane and Ebony’s commitment to the Delegation and the role and rights of civil society and communities in HIV responses will be sorely missed.
Over the next six months, the Delegation will focus on engaging in the mid-term review of the United Budget, Results and Accountability Framework, continuing discussions on HIV and AIDS in the Post-2015 Development Framework, implementation of a newly developed partnership agreement between the Global Fund and UNAIDS, planning and engagement in a thematic session on Social Drivers at the 34th PCB, and development of the next NGO Report (to be presented at the 34th PCB). The delegation will also be conducting recruitment for new members commencing mid-2014. Watch out for the call for applications.

**Evaluating UNAIDS engagement with Civil Society**

This PCB meeting provided opportunity for the launch of a new process for evaluating the Joint Programme's engagement with Civil Society. For several years now, the NGO Delegation has been pressing for a new evaluation process to be used by the Secretariat and the Co-Sponsors other than the very anemic Civil Society indicators in the UBRAF. At the October Technical Consultation, the Delegation supported the consultants' recommendations that a new questionnaire be adapted from the UNAIDS Guidance for Partnerships with Civil Society including People Living with HIV and Key Populations and that a new Co-Sponsors' thematic report/assessment be developed each year. This is to be supported by selected case studies conducted by a third party evaluator.

In response to this recommendation, the Secretariat and Co-Sponsors organized a Co-Sponsors’ Evaluation Working Group on Civil Society (CEWG) to initially be chaired by Fatiha Terki of the World Food Program. The CEWG will have two Delegation members acting as full participants, actually helping to shape the questionnaire and the annual report. The CEWG, which held its first meeting during the week of the PCB, will also begin looking toward the development of new indicators to be introduced following this UBRAF cycle. The Delegation is delighted to be participating in this process, with a particular goal of enhancing the Joint Programme’s engagement of key populations.

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**NGO Observers who attend and intervene in the Board meeting are a vital part of reminding the board of all the persons who are implicated in its work. Their presence also strengthens the work and accountability of the NGO Delegates.**

**THANK YOU** to the civil society Observers and organizations who supported the NGO Delegation. Thank you also to all civil society partners who contributed to preparatory briefing calls and supported the continuation of the thematic session.

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**Leadership in the AIDS Response**

The Delegation had written to Michel Sidibe conveying the concern of the Delegation and our Civil Society partners about his choice of Sir Andrew Witty, the CEO of GlaxoSmithKline (GSK), for the
Leadership session, whilst also recognizing that the choice was Michel’s prerogative. This was based on the feeling that a big pharma CEO was not the right symbol for leadership in the AIDS response. We requested a Delegation meeting with Sir Andrew, which was granted. The Delegation prepared both an intervention and notes for the meeting that expressed our concerns about the behavior of big pharma in opposing generics, their lobbying for TRIPS+ clauses in Free Trade Agreements, restrictive voluntary licenses especially for MICs, and their generally greedy pricing structures.

But Sir Andrew’s plane was not able to land in Geneva because of fog. So, on the one hand we got our wish, while on the other we missed a chance to have a frank discussion with him.

**Strategic Use of ARVs**

The Delegation generally welcomed this paper. But our intervention on the treatment aspect addressed two issues. One was diagnostics and the need for reliable and affordable diagnostics in all countries, especially viral load. We suggested that a better measure of success in treatment than numbers of people on treatment would be numbers of people with viral load suppression.

The second part of the intervention was about the need for affordable access to second and third line ARVs in all countries. It then explored some of the price barriers such as the cumbersome process for TRIPS flexibilities, TRIPS+ clauses in Free Trade Agreements, restrictive voluntary licenses (in other words many of the points we would have made had the Leadership session gone ahead). The unacceptable inequity in access between developed and developing country was a major point of this intervention. At the end it called for a moratorium on TRIPS until a better mechanism for delivering affordable essential medicines in all countries can be found.

**Coordination of Technical Support**

The Delegation welcomed the paper on the Coordination of Technical Support, especially the proposed new Roadmap and the recognition of the need to prioritize response to the Global Fund’s New Funding Model. We noted our concerns about UNAIDS’ capacity to deliver speedily enough and to the level needed, ensuring accountability for this new technical support Roadmap. It was disappointing that the Technical Support Decision Point, in its exclusive focus on countries served by the Global Fund, excluded any mention of ongoing technical support to meet the needs of other countries, as noted by those Member States led by Mexico. Similarly, the NGO Delegation was astounded that the Decision Point failed to recognize the critical role of civil society including key populations relative to providing technical support in the AIDS response. By excluding any such mention, the Decision Point contradicts frameworks such as UNAIDS Treatment 2015 which emphasizes the urgent scaling up of community based and civil society responses.
After the Decision Points had been adopted we made an intervention expressing our concerns about the failure to mention Civil Society so that it will be recorded in the minutes.

**Executive Director’s Report**

In response to Michel Sidibe’s mention of faith-based communities, the Delegation took the opportunity to affirm the vital role of faith-based healthcare professionals as partners in HIV prevention, treatment and care. We also noted, however, the growth of religious fundamentalism and its support of disenabling social and legal environments, impacting negatively on universal access to HIV services. The Delegation called on UNAIDS to elaborate a strategy to specifically address this emerging threat.

The Delegation also appreciated Mr. Sidibe’s recognition of the importance of keeping civil society and key communities in the front of the AIDS response. However, we noted that on the other hand the funds for civil society engagement continue to decrease. We called on UNAIDS to implement the various Decision Points (DPs) relative to this matter approved during the 30th PCB, and to report to the PCB in 2014.

**On the Post-2015 ongoing discussions, the NGO delegation highlighted that HIV should remain a high priority within the Post-2015 framework.** We welcomed Michel Sidibe’s request made at International Conference on AIDS and STIs in Africa (ICASA) to have a distinct goal in the Post-2015 framework and urged the present Member States and co-sponsors to embrace and support this proposal. The delegation also emphasized that while not forgetting that governments still have to accelerate efforts to achieve the current MDGs and 2011 High Level Meeting (HLM) Commitments, we would like to have clarity on the UNAIDS strategy to promote among Members States the idea of having HIV as a distinctive goal within the Post-2015 agenda, especially by building synergy with other sectors beyond Health, including the sexual and reproductive rights sector, which is key to move forward the agenda of treatment and prevention.

Prior to the PCB, the NGO Delegation was widely involved with other Civil Society groups globally to call for a High Level Meeting (HLM) on HIV/AIDS. During the PCB, the Delegation submitted to Mr. Sidibe a hard copy of a letter signed by over 400 CS groups calling for such an HLM. After much difficult negotiation, the PCB adopted a Decision Point that invited the United Nations General Assembly to consider convening a High Level Meeting on HIV at an appropriate time after 2015 as part of a broader strategic effort to reaffirm and renew political commitments, and to ensure accountability towards the achievement of universal access to HIV prevention, treatment, care and support in the post-2015 era. This was a major success for the Delegation at this PCB as well as in terms of collaboration between the Delegation and wider civil society.

**NGO Report**
This year the NGO Report was “The Equity Deficit: Unequal Access to HIV Treatment, Care, and Support for Key Affected Communities”. Too many people with HIV lack access to ART. In this Report, we focused on treatment access for gay men and other men who have sex with men, transgender people, sex workers and people who inject drugs: communities that persistently struggle for visibility and access to health services in many contexts.

The Report was presented prioritizing examples of inequities that key communities suffer in different countries. The evidence based data demonstrates very clearly the "Equity Deficit". We made recommendations to UNAIDS and Member States. After our presentation, most of the governments and co-sponsors expressed support for and welcomed the Report and its clarity as well as the in depth analysis. Three countries questioned the methodology as well as the right of the NGO Delegation to present DPs, according to article 10 of the ECOSOC resolution. UNAIDS Legal Counsel clarified for the PCB the right of the NGO Delegation to present recommendations to the Board. That right extends to NGO and other Observers assuming the required protocol is followed. As the only representatives at the PCB with voting rights, it is then at Member States’ prerogative as to whether they accept such recommendations. The NGO Delegation thanked those who provided positive comments and answered those questioning the methodology by noting that data included in the Report was drawn from over a 100 peer reviewed research sources, validated country and global HIV and AIDS reporting, as well as interviews with 40 key informants from communities across the globe.

The Delegation also clarified that our role on the PCB is not to present ‘scientific studies’, but to bring the voice of our communities. However, in this case, the Report was intentionally designed as a meta-analysis of available and verifiable data and met high standards of methodological rigour.

Regarding our rights on the PCB, we specified that we are members of the PCB with voice so we can request that they discuss our recommendations and decide about them: we have the right to ask them to discuss because we express the voice and experiences of our constituencies. In the end, our approach was accepted and we had three negotiations in the drafting room about our recommended DPs.

**Thematic Segment: HIV, Youth and Adolescents**

The youth thematic presented an opportunity to take a critical look at the impact of HIV on young people and adolescents. While HIV infection amongst young people has decreased by 32% globally, AIDS related deaths amongst youth continue to rise. At the same time appropriate transition from adolescent to adult care and access to HIV antiretroviral treatment remain wholly inadequate.

The thematic day offered a combination of spoken word, candid discussion and well-constructed interventions from global youth leaders living with and affected by HIV, representing key populations and those leading the charge as HIV and Human Rights innovators. The youth leaders provided vivid
illustrations of gross discrimination, legal barriers and harmful cultural norms that impede young people’s access to HIV, reproductive health and social protection services. These powerful testimonials included accounts of rape without recourse, culturally sanctioned child-marriage resulting in HIV infection, exclusion of youth using drugs from HIV care, isolation of LGBT youth and absence of youth health services.

Luiz Loures, Deputy Executive Director of UNAIDS, provided slides detailing the HIV epi-data on youth globally. A number of gaps were exposed in access to and availability of HIV and reproductive services for youth. Loures emphasized the major role of stigma, discrimination and the law creating barriers and excluding youth from care, particularly youth from key affected populations. He gave examples of harm reduction programming and programs addressing the needs of young MSM as effective solutions. Following, several youth presenters gave detailed examples of effective and inclusive programming led by youth that bring virtual support to young people living with HIV, expands HIV and reproductive health services to youth in rural communities, links youth that use drugs into HIV prevention and treatment and builds youth skillsets and advocacy activities. These examples all emphasized the role of youth leadership, human rights, social inclusion and greater financial investment on youth health structures and service delivery.

During the Youth Thematic session there were two interventions from the PCB NGO Delegation. The first intervention called for the PCB to reform punitive laws that deny services to key populations, greater investment in harm reduction services and access to HIV testing at the community settings. The second intervention called on the PCB to fund, implement, monitor and evaluate the UNAIDS Action Agenda for Women and Girls; support an increase in the age of consent for marriage; include young women and girls in national strategic planning; and leverage resources from the Global Fund and other mechanisms to resource transformative responses for the health and well-being of young women and girls.

Side meetings

One NGO Delegate participated in the Lancet Commission working group meeting on Sexual Reproductive Health Rights (SRHR) and HIV. The working group reviewed and discussed the draft paper developed by UNFPA looking at mechanisms to integrate HIV and SRHR in the Post-2015 Agenda. The draft paper examined barriers to access, health infrastructure and model integration programs.

Reminder: What is the PCB again?

The Programme Coordinating Board (PCB) is the governing body of UNAIDS. It is made up of 22 voting Member States, the 11 UN Cosponsors that make up the UNAIDS program, and an NGO Delegation (consisting of one delegate and one alternate from each of 5 regions). Please visit our website at: www.unaidspcbngo.org to see all presentations, decision points and talking points. If you are not already a subscriber, please join our mailing list.