

**37TH UNAIDS PCB MEETING
NGO Delegation COMMUNIQUE**





The focus of 37th UNAIDS Programme Coordinating Board (PCB) Meeting was on the ambitious language of the UNAIDS Updated Strategy (2016-2021), which was adopted after a contentious discussion among PCB members about sexual and reproductive health rights, and after months of consultations and negotiations. Throughout the strategy process, the NGO Delegation pressed for language to reflect current realities for communities, including language

on gender equality, trade barriers, protective laws, youth leadership, and meaningful involvement of people living with HIV. At the PCB meeting, the NGO Delegation engaged in discussions and lobbying to ensure the inclusion of the language on sexual and reproductive health and rights (SRHR) in the Strategy, as a key component of the HIV response. In line with this, the NGO Report of the Delegation, which we requested to be postponed and tabled for the 38th PCB, is focused on SRHR of key populations, including those living with HIV, within the framework of the right to development.

The NGO Delegation advocated for expanding the definition of humanitarian emergencies to include situations where key populations and people living with or affected by HIV are placed in heightened political and/or economic risks and vulnerabilities, including the pullout of funding support. We also called for the Joint Programme to address the issue of key populations in prisons from a public health perspective and to increase fund for HIV programs for them. The NGO Delegation contributed to the development of the Unified Budget Review Accountability Framework (UBRAF) 2016-2021 discussions, which is envisaged to be completed and adopted at the 38th PCB Meeting next year.

The unusual schedule of the 37th PCB Meeting, which commenced on a Monday instead of the regular Tuesday, created challenges for the NGO Delegation and hampered our pre-PCB advocacy efforts, not just with Member States, but also with Co-sponsors and other stakeholders. Despite these limitations, the NGO Delegation was able to lobby for approval of Decision Points (DPs) on various agenda items, in discussion and negotiation with Member States.

Finally, the 37th PCB Meeting approved the appointment of incoming alternate NGO Delegates from the following regions:

Africa: Uganda Youth Coalition on Adolescent Sexual Reproductive Health Rights and HIV (CYSRA) represented by Mr. Lumumba Musah

Asia-Pacific: India HIV/AIDS Alliance, represented by Ms. Simran Shaikh

Europe: AIDS Action Europe, represented by Mr. Ferenc Bagyinszky

North America: Canadian Aboriginal AIDS Network (CAAN) represented by Mr. Trevor Stratton

Executive Director's Report – Laurel Sprague, North America



UNAIDS Executive Director Michel Sidibe described the current situations as a 'fragile moment in history' in which the decisions taken will lead either to the end of HIV as an epidemic or to a rebound in infections and deaths. He called for a commitment to fast track the HIV response through the adoption of the Updated Strategy (2016-2021). The NGO Delegation was pleased to hear Sidibe speak out against intellectual property barriers to medications for low-income countries, continuing

UNAIDS' follow up on decisions arising from the NGO Report to the 35th PCB Meeting: *When 'Rights' cause wrongs: Addressing Intellectual Property barriers to ensure access to treatment for all people living with HIV.* (Link is [here](#))

The NGO Delegation used our remarks (link to intervention [here](#)) to raise an alarm about the gap between the ambitious language in the Strategy and the declining levels of funding. Noting that we have fast track language but not fast track money, we called on Member States to fully fund the following: the Updated Strategy (2016 to 2021); the Global Fund replenishment; and civil society work to address HIV, the funding needs for which are estimated to be at least triple of current funding levels.

We dedicated our remarks to the memory of Joel Nana with whom many of us had the honor to serve with on the NGO Delegation.

Update on the AIDS Response in the Post-2015 Development Agenda – Charles King, North America



The NGO Delegation was pleased with the effort made by the Joint Programme to ensure that the AIDS response is integrated into the Post-2015 Sustainable Development Goals (SDGs). Further, in response to the DPs coming out of the 35th PCB Thematic to reduce new infections among people who inject drugs by 50%, the Joint Programme has been aggressively advocating for a public health approach in the declaration coming out of the 2016 Special

Session of the United Nations General Assembly on the World Drug Problem (UNGASS on Drugs). The NGO Delegation made two interventions. One called for civil society inclusion in the planning and execution of the 2016 High Level Meeting (HLM) on HIV/AIDS (link to intervention [here](#)). The second was in support of a set of new DPs, which the PCB approved with very little editing (link to approved DPs [here](#)). The first put the PCB on record calling on the Joint Programme “to strongly advocate for a people-centered, public health approach and respect for human rights, including an accountability mechanism” in the outcome document of the UNGASS on Drugs. The second called for the Joint Programme to strongly advocate for a commitment to address the social drivers of HIV and “to connect HIV with the eradication of extreme poverty, ending hunger and inequality...” This decision point built on the DPs passed at the 35th PCB in follow up to the Thematic on social drivers of HIV, and further commits the Joint Programme to a much more holistic and multi-sectorial approach to addressing social drivers of marginalization.

Updated UNAIDS Strategy 2016-2021 – Angeline Chiwetani, Africa, and Jeffrey Acaba, Asia-Pacific



At the recently concluded 37th PCB Meeting, the Updated Strategy (2016-2021) was fully adopted, with the exception of Iran, which chose to not block the adoption of the strategy but disassociated itself from language on sexual and reproductive health and rights within the Strategy (link to the adopted Strategy [here](#)). The Strategy will be the guiding document to fast track the HIV response globally. The NGO

Delegation, having actively engaged in the consultations during the development process of the Strategy, acknowledged the efforts undertaken by UNAIDS. However, in the days leading up to the PCB, several Member States expressed reservations and opposition to some critical language in the Strategy, particularly on sexual and reproductive rights. During the PCB meeting proper, there were continued efforts to remove such language and refer to the watered-down Post-2015 SDG-agreed version, '*sexual and reproductive health and reproductive rights*.' After vigorous negotiations, with the NGO Delegation actively participating, the language, '*sexual and reproductive health and rights*' was finally adopted.

The NGO Delegation noted that central to the framework of the Updated Strategy is the recognition of the rights of key populations, including women in all their diversities, young people and other vulnerable groups, incarcerated and indigenous people. Sexual and reproductive rights are equally important as political, social, civil and economic rights. And while we envision ending AIDS by 2030, people are still getting infected everyday and funding is continuously dwindling in many of our countries. The Delegation believes that for the Strategy to be owned by communities, its implementation should entail a more meaningful involvement of people living with HIV and other key populations.

Unified Budget, Results and Accountability Framework (UBRAF) 2016-2021 – Simon Cazal, Latin America and Caribbean, and Laurel Sprague, North America



The UBRAF business plan, preliminary accountability framework, and budget outline (complete document [here](#)) were presented for adoption at the 37th PCB; however, the work to develop the results and accountability framework will continue into 2016, to be tabled for approval at the 38th PCB. As decided at the 36th PCB, a working group of independent experts will lead this effort.

In the interventions, the NGO Delegation argued that the budget, with zero increase from previous years, is wholly inadequate. We called for a UBRAF that will be transparent and clear for communities to use and to understand, with more robust indicators to monitor activities of the Joint Programme. The NGO observers expressed concerns that attention to treatment for children, the Global Fund, young people, key populations, investment in communities, drug users and people in prisons and closed settings was inadequate. The United Kingdom (UK) insisted on clearly justified budget allocations, including those to each cosponsor. India supported increased allocations to regional programs. The Netherlands and Denmark asked cosponsors to demonstrate better accountability and the US encouraged them to contribute more funds to the Updated Strategy.

In the Executive Director's response, he committed to develop a task force on civil society funding and to ensure that support for the key role of civil society and communities will be monitored within the UBRAF.

Follow-Up to the HIV in Prisons and Other Closed Settings Background Paper – Ferenc Bagyinszky, Europe, and Trevor Stratton, North America



The NGO Delegation was satisfied with the robust DPs set forth, one of which requests the Joint Programme to support Member States and civil society in strengthening a human rights and public health approach to prison health. The NGO Delegation stressed that highly stigmatized and too often criminalized activities such as the non-disclosure of HIV status, same-sex sexual relations, certain consensual sex acts, drug use and sex

work activities should be addressed through a public health approach, rather than dealt with in the criminal justice system. We also stressed that alternatives to incarceration such as restorative justice, community councils and rehabilitation be made easily accessible.

The Joint Programme and relevant partners were also encouraged to address issues related to HIV and health in prisons and other closed settings by building upon the momentum and fully engaging in the 2016 UNGASS on Drugs and in the 2016 HLM on HIV/AIDS. The Delegation insisted that highest attainable standard of health be afforded to people in prison and called for equal treatment for all people. The Delegation also noted that we would not be able to achieve the 90-90-90 targets if we continue to not employ evidence-based best practices for our people in prisons and closed settings.

Follow Up to the Thematic Segment from the 36TH PCB Meeting: HIV in Emergency Contexts – Jeffry Acaba, Asia-Pacific



In consultation with civil society partners, the NGO Delegation put forward strong DPs, particularly on adopting a broader definition of emergencies that would include key population emergencies and ensuring that community-based organizations are part of the planning and implementation of service delivery in humanitarian emergency contexts. Both positions have been clearly discussed and recommended in the

Secretariat report; however, neither were appropriately reflected in the proposed DPs that came along with the report. The Delegation worked with World Food Programme (WFP) and the UN High Commissioner for Refugees (UNHCR) and arrived at a consensus to table these two DPs, among others, despite anticipating pushback against broadening the definition of humanitarian emergencies.

On the second day of the PCB, The NGO Delegation made a strong plea to broaden this definition (see [link](#)). We also called for an end to sexual violence against key populations, particularly against young men who have sex with men and young transgender women (see [link](#)). However, in the informal drafting room session, both proposals failed to gain consensus among PCB members. While some Member States such as the US Government (USG) supported the proposal to broaden the definition, most Member States did not see this as a necessity, stating that there is an already agreed definition. Despite the challenges and limitations in the lobbying process for this particular PCB meeting, the NGO Delegation was able to advocate that community-based organizations working in the context of emergencies be given priority support. Some members of the Interagency Task Team on Emergencies, including the UNHCR, indicated interest to study the proposal to broaden the definition of emergencies.

Thematic Segment: Shared responsibility and Global Solidarity- Angeline Chiwetani and Lumumba Musah, Africa

The 37th PCB Thematic Segment focused on 'shared responsibility and global solidarity' on the issue of HIV financing. The NGO Delegation noted with great concern the huge decline in HIV funding, including the commitment to replenish the Global Fund. Civil society keynote speaker Alessandra Nilo, former PCB NGO Delegate from Latin American and Caribbean (LAC) region, noted that 'shared responsibility and global solidarity' were contested terms in the Post-2015 SDG process, and there needs to be structural changes in the way the HIV money is allocated by governments and

multilateral donors (see complete speech [here](#)). There were repeated calls for governments to increase domestic financing, with the recognition that, in many countries, communities' access to HIV financing is very limited because of stigma and criminalization against key populations. Accountability mechanisms were called for to ensure funding goes to communities most affected by HIV. The NGO Delegation called on the UNAIDS Joint Programme and Member States for “fast track money” in order to fast track the end of AIDS by 2030. The NGO Delegation and CS representatives also highlighted that many African countries, as well as low-income countries and middle-income countries, will not achieve the 90-90-90 targets if they will not be well resourced. As the Global Fund plays a huge financing role, CS Observers also called upon Member States to fully fund the Global Fund so that it meets its funding targets in the HIV response.

Report by the NGO Representative – Jeffry Acaba, Asia-Pacific

The 2015 NGO Report to the PCB was on the topic of sexual and reproductive health and rights (SRHR) in the context of the right to development of key populations. Titled, “Sexual Rights, Sexual Health, Reproductive Rights and Reproductive Health of People Most-Affected by HIV: The Right to Development”, the report was envisaged to make a case on the need to recognize and protect SRHR in achieving the right to development, and how non-recognition and non-inclusion of these health and rights will not end the AIDS epidemic in 2030.

However, with the projected intense discussions surrounding the adoption of the Updated Strategy (2016-2021) and the Unified Results and Accountability Framework (UBRAF), and given the sensitivity of the Report topic, which would require substantial discussion and deliberation, the NGO Delegation was requested to postpone the submission and presentation of the Report to the 38th PCB. After consultation with key community experts and global key population networks who contributed to the Report, the NGO Delegation agreed to move its presentation to the 38th PCB in June 2016.

