GLOBAL CIVIL SOCIETY STATEMENT OF CONCERN ON THE UN HIGH LEVEL MEETING ON ENDING AIDS

The High Level Meeting on Ending AIDS, being held at the UN in New York in June, will bring UN member states together to agree to a new political declaration on HIV. This declaration must both reaffirm and drive forward the priorities for the future of the AIDS response.

However, as civil society organisations and networks from across the globe, we are deeply concerned that the 2016 High Level Meeting is not on track for success to demonstrate the needed political and financial commitment to end AIDS as a public health threat by 2030. Too many governments seem content to deprioritize the global HIV response, despite AIDS remaining one of the world's leading killers. While there are many important competing priorities outlined in the Sustainable Development Goals, it is critical that the world renews commitment to defeating the AIDS epidemic. If we fail to do so immediately, infection rates and death rates will increase, as will the funding needed to control the epidemic. The 2016 High Level Meeting will demonstrate whether there is renewed political commitment from UN member states to increase financial investment between now and 2020 and end the AIDS pandemic once and for all.

We call on the world to judge the High Level Meeting to be a failure if the Political Declaration does not contain unequivocal commitments by governments to:

- 1) **Bold, ambitious, and achievable service delivery targets** that describe a) how many people (disaggregated by age, gender, and key population) will be reached by HIV treatment, care and combination prevention b) the quality of those services; and c) the intended impact of government efforts by 2020 and 2030. For example, the declaration should endorse reaching 30 million people on treatment by 2020.
- 2) Concrete financial targets for scaled up and sustained investments from multilateral, bilateral and domestic resources. UNAIDS estimates US\$ 31.3 billion a year in 2020 is necessary for reaching the UNAIDS 2020 fast track targets and ending AIDS as a public health threat by 2030. Resources, support and global solidarity should be targeted as appropriate across low-, middle- and high-income countries to build and sustain national responsibility and resources for their AIDS response.
- 3) **End disparities in the** *standard* **of care** available between and within countries. All countries must commit to revising policies to provide immediate access to current treatment and prevention technologies and implement differentiated, tailored and evidence-based service delivery models that address the real needs of different populations to bring the AIDS response into line with the latest global guidelines.
- 4) Characterize the epidemic based on epidemiological data. In particular, make clear the huge impact of HIV on gay, bisexual men and other men who have sex with men, sex workers, transgender women, people who use drugs, prisoners, and migrants. Address the growing epidemics in adolescents globally and among women and girls in sub-Saharan Africa, as well as the low level of HIV treatment for children in the region. Pledge bold steps and targets that bring equity to the AIDS response for all underserved populations.
- 5) Remove punitive, discriminatory, and restrictive laws that prevent access to HIV services. Decriminalize HIV non-disclosure, exposure and transmission, same-sex sexual practices, sex work, gender non-conformity and drug use. Age of consent laws that undermine scale up of HIV treatment and prevention for young people should be removed.
- 6) Remove barriers to affordable, accessible, and quality-assured new medicines, diagnostics alongside evidence-informed rights-based HIV treatment, care and combination prevention services. Ensure that intellectual property systems no longer present a barrier to the development of and access to affordable, quality medicines and other health products.
- 7) Recognize the critical role of people living with and affected by HIV, community-led and community-based responses and ensure increased financial support to reach the most affected and marginalized.