Agenda item 7

UNAIDS/PCB (59)/26.29

NEXT PCB MEETINGS

UNAIDS

8–11 December 2026 | Geneva, Switzerland
UNAIDS Programme Coordinating Board
Issue date: 24 November 2026

Additional documents for this item: N/A

Action required at this meeting—the Programme Coordinating Board is invited to:

- *Agree* that the themes for the 60th and 61st PCB thematic segments will be:
    - *Sustaining an Inclusive and integrated HIV Response Amid Funding Transitions and Growing Threats to Human Rights and Civic Space (June 2027)*;
    - *Integrating Chronic HIV Care with Non-Communicable Disease Management: A Holistic Approach to Long-Term Health and Well-Being (December 2027)*

- *Request* the PCB Bureau to take appropriate and timely steps to ensure that due process is followed in the call for themes for the 62nd and 63rd PCB meetings; and

- *Approves* the dates and venue of the 64th and 65th PCB meetings in 2029 as follows:
    a. *64th PCB meeting: 26-29 June, full virtual;*
    b. *65th PCB meeting: 11-14 December, fully virtual;*

Cost implications for the implementation of the decisions: none

Themes for the 60th and 61st Programme Coordinating Board meetings in 2027

1. The UNAIDS Programme Coordinating Board (PCB) decided at its 20th meeting in June 2007 that future Board meetings will consist of a decision-making segment and a thematic segment (ref. PCB 20/rec.10a). Further to this decision, the 21st meeting of the PCB in December 2007 discussed the modalities for the identification of themes and agreed on a process whereby; *"the theme for the Programme Coordinating Board thematic segments should be decided by the Board upon recommendation of the Programme Coordinating Board Bureau. This recommendation should be based upon a call for proposals directed to all PCB constituencies and possibly other key actors..."* (ref. UNAIDS/PCB (21)/07.5 para.9).

2. The PCB also agreed that proposed themes should be considered on the basis of four criteria: broad relevance, responsiveness, focus, and scope for action. At its 57th meeting in December 2025, the Board requested that the PCB Bureau take appropriate and timely steps to ensure that due process is followed in the call for themes for the 60th and 61st PCB meetings (ref. UNAIDS/PCB (57)25.35).

Process of selection of themes for the 60th and 61st Programme Coordinating Board meetings

3. Accordingly, the PCB Bureau sent out a call to all Board Members on 18 August inviting proposals for themes for the 60th and 61st PCB meetings to be held in June and December 2027.

4. At its meeting on 23 November 2026, the Bureau considered the three submitted proposals (listed below), giving due consideration to criteria in paragraph 1 above, as well as other factors, including: the level and diversity of support; urgency of the issue; whether the issue was being considered elsewhere; inclusion of the theme as a sub-issue under a broader or related theme; and the suitability of the theme to be addressed by the Board at a particular time.
    - Proposal 1: Integrating Chronic HIV Care with Non-Communicable Disease Management: A Holistic Approach to Long-Term Health and Well-Being.
    - Proposal 2: Sustaining Inclusive and Integrated HIV Services: Financing and Policy Pathways for Key Population-Specific Care During and Beyond the Funding Transition.
    - Proposal 3: The impact of anti-rights movements on the HIV response.

5. Members noted the strength and relevance of all submitted proposals. After discussing in detail the proposed themes, the Bureau agreed on the proposal *Integrating Chronic HIV Care with Non-Communicable Disease Management: A Holistic Approach to Long-Term Health and Well-Being* for December 2027. For June 2027, all Bureau members supported combining two of the proposals as reflected in the final proposal entitled *Sustaining an Inclusive and integrated HIV Response Amid Funding Transitions and Growing Threats to Human Rights and Civic Space*.

Date and venue for the next Programme Coordinating Board meetings

6. The following dates are proposed for the Board meetings in 2029:
    - 64th meeting: 26-29 June 2029, fully virtual.
    - 65th meeting: 11-14 December 2029, fully virtual.

Proposed Decision Points

The Programme Coordinating Board is invited to:

7. *Agree* that the themes for the 60th and 61st PCB thematic segments will be:
    a. *Sustaining an Inclusive and integrated HIV Response Amid Funding Transitions and Growing Threats to Human Rights and Civic Space (June 2027)*;
    b. Integrating Chronic HIV Care with Non-Communicable Disease Management: A Holistic Approach to Long-Term Health and Well-Being (December 2027)

8. *Request* the PCB Bureau to take appropriate and timely steps to ensure that due process is followed in the call for themes for the 62nd and 63rd PCB meetings; and

9. *Approve* the dates and venue of the 64th and 65th PCB meetings in 2029 as follows:
    a. *64th PCB meeting: 26-29 June 2029, fully virtual;*
    b. *65th PCB meeting: 11-14 December, fully virtual.*

[Annex follows]

Annex 1. Proposed theme for the 61st Programme Coordinating Board Meeting (June 2027)

Title: "Sustaining an Inclusive and integrated HIV Response Amid Funding Transitions and Growing Threats to Human Rights and Civic Space"

Broad relevance: What is the relevance of the theme to the global AIDS response? (max. 200 words)

The global AIDS response is facing interconnected challenges arising from major shifts in external financing and the growing influence of organized anti-rights movements. Together, these developments threaten the sustainability, inclusiveness and effectiveness of HIV responses, particularly for key populations and other underserved communities.

Funding reductions and changing donor priorities are placing essential HIV services, including community-led and key population-specific services, at risk. At the same time, anti-rights mobilization, disinformation and increasingly restrictive policy and legal environments are undermining human rights, shrinking civic space and creating additional barriers to accessing HIV prevention, treatment and care. These developments can also undermine efforts to strengthen domestic ownership and integrate essential services into national health systems.

The thematic segment would provide an opportunity to examine how countries, communities, civil society, the UN Joint Programme and other partners can address these interconnected challenges. It would identify practical financing, policy and programmatic approaches to sustain essential services, protect community leadership and strengthen enabling environments for an inclusive and resilient HIV response during and beyond the funding transition.

Responsiveness: How is the theme responsive to the interests, concerns and information needs of a broad range of actors in the global AIDS response? (max. 400 words)

The theme responds to a shared concern across the global AIDS response: how to sustain progress towards ending AIDS amid significant changes in the funding landscape and growing political, social and legal challenges that threaten access to essential HIV services and the rights of populations most affected by HIV.

For Member States, the discussion offers an opportunity to explore approaches to strengthening national ownership, domestic resource mobilization and health-system sustainability, while addressing policy and legal barriers that prevent key populations and other underserved communities from accessing essential services. It can also provide practical examples of how countries are maintaining differentiated and community-centred services within national health systems and health benefit packages.

For communities and civil society, the thematic segment provides an opportunity to highlight the consequences of funding reductions and anti-rights mobilization for community-led responses, key population-specific services and the broader enabling environment. This includes threats to LGBTQ+ people, harm reduction programming, comprehensive sexuality

education, sexual and reproductive health and rights, gender-affirming care and other essential services. It would also recognize the role of community-led organizations in service delivery, advocacy, monitoring and protecting access to services, particularly in increasingly restrictive environments.

For UNAIDS Cosponsors and technical partners, the discussion can examine opportunities for stronger collaboration in addressing both the financing and human rights dimensions of the transition, including how the Joint Programme can support countries in protecting essential services, addressing anti-rights threats and strengthening enabling policy and legal environments.

For donors and development partners, the theme offers an opportunity to identify where strategic and sustained investment is needed to maintain essential services, support community-led organizations and strengthen national responses to human rights and civic space challenges. It can also inform future donor priorities and the allocation of resources through the UBRAF.

Bringing these perspectives together would allow the PCB to move beyond identifying individual challenges towards examining how financing, policy, human rights and community leadership can reinforce one another in sustaining an inclusive HIV response.

Focus: how can consideration of the theme be focused to allow for in-depth consideration in one day? (max. 200 words)

The thematic segment could be structured around three interconnected areas:

1. **Understanding the risks to an inclusive and sustainable HIV response:** Examine how funding reductions, anti-rights mobilization, disinformation and restrictive policy and legal environments are affecting the availability, accessibility and continuity of essential HIV services, particularly for key populations and other underserved communities, as well as community-led organizations and civic space.
2. **Identifying approaches that protect and sustain essential services:** Explore country and community experiences in securing sustainable financing, integrating essential services into national health systems and health benefit packages, maintaining differentiated and community-led service delivery, and responding effectively to anti-rights threats and human rights challenges.
3. **Agreeing on priority actions and shared responsibilities:** Identify practical measures for Member States, the Joint Programme, communities, civil society and donors to strengthen domestic financing, protect enabling environments, sustain community leadership and ensure accountability for the continuity and accessibility of essential HIV services.

The discussion could draw on a small number of country and community examples to illustrate both challenges and effective responses, with a focus on generating actionable recommendations.

Scope for action: How does the theme address possible and necessary action to be undertaken in the response to AIDS, rather than purely theoretical or academic issues? (max. 400 words)

The thematic segment would focus on practical measures to ensure that funding transitions and growing threats to human rights and civic space do not undermine access to essential HIV services or reverse progress towards ending AIDS. It would provide an opportunity for the PCB to identify concrete actions that Member States, the Joint Programme, communities, civil society, donors and other partners can take to strengthen the sustainability and inclusiveness of national HIV responses.

Possible areas for action include:

Strengthening domestic financing and sustainable service delivery: Encourage countries to assess and increase domestic financing for essential HIV and integrated services, including services specifically required by key populations, and to establish sustainable financing pathways that address gaps created by reductions in external funding.

Protecting and integrating essential services: Support the inclusion of key population-specific and integrated services, including gender-affirming care, opioid substitution therapy (OST), harm reduction, sexual and reproductive health and STI services, within national health benefit packages, primary and community health systems and sustainable service-delivery models, while maintaining differentiated approaches that respond to the specific needs of affected populations.

Addressing policy, legal and human rights barriers: Identify and address laws, policies and practices that restrict access to HIV services, undermine human rights and shrink civic space. Explore effective responses to anti-rights mobilization and disinformation, including stronger collaboration between governments, communities, civil society and the Joint Programme.

Protecting community leadership and community-led responses: Ensure the meaningful participation of communities and key population-led organizations in transition planning, financing decisions, service design, advocacy and monitoring. Recognize and sustain their essential role in reaching underserved populations, protecting access to services and holding national responses accountable.

Strengthening coordinated action and accountability: Identify opportunities for stronger collaboration across the Joint Programme, including its Cosponsors, and with national and regional partners. Promote mechanisms to monitor the impact of funding transitions and policy changes on service availability, quality and accessibility, and identify where sustained donor investment and support through the UBRAF are needed.

The thematic segment could conclude with actionable recommendations for Member States, UNAIDS, Cosponsors, donors and communities to safeguard essential services, protect human rights and civic space, and strengthen sustainable, inclusive and community-responsive HIV responses during and beyond the funding transition.

Annex 2. Proposed theme for the 62nd Programme Coordinating Board Meeting (December 2027)

Title: "Integrating Chronic HIV Care with Non-Communicable Disease Management: A Holistic Approach to Long-Term Health and Well-Being"

Broad relevance: what is the relevance of the theme to the global AIDS response?

As people living with HIV are living longer due to effective antiretroviral therapy, the epidemic has increasingly shifted from an acute, life-threatening condition to a manageable chronic disease. However, this success brings new challenges: PLHIV face a higher burden of non-communicable diseases (NCDs) such as cardiovascular disease, diabetes, hypertension, mental health disorders, and cancers—often at earlier ages than the general population. Fragmented health systems that silo HIV services from NCD care fail to address the complex, intersecting health needs of this aging population.

This thematic topic calls for a paradigm shift: the integration of HIV chronic care into a broader, person-centered framework that bridges communicable and non-communicable disease management. A holistic vision requires strengthening health systems to deliver continuous, coordinated care that addresses not only viral suppression but also metabolic, mental, and social health. It emphasizes the importance of shared risk factors, co-morbidity screening, lifestyle interventions, and community engagement, ensuring that no one is left behind as we pursue the 2030 targets.

Responsiveness: how is the theme responsive to the interests, concerns and information needs of a broad range of actors in the global AIDS response?

Key Sub-themes for Discussion:

1. Epidemiological convergence: Understanding the dual burden of HIV and NCDs in low-, middle-, and high-income settings.

2. Health system readiness: Integrating NCD screening, treatment, and monitoring into routine HIV care platforms.

3. Person-centered models: Moving from disease-specific programs to comprehensive, lifelong care that respects patient preferences and social determinants.

4. Mental health and psychosocial support: Addressing depression, stigma, and cognitive decline as integral components of chronic HIV management.

4. Community and peer-led approaches: Empowering PLHIV to co-manage their health across multiple conditions.

5. Financing and policy coherence: Aligning resources, indicators, and governance to support integrated service delivery.

Focus: how can consideration of the theme be focused to allow for in-depth consideration in one day (or half day)?

Expected:

- Renewed commitment to a holistic, integrated care agenda within the HIV response.

- Practical recommendations for integrating NCD services into HIV clinics and primary care.

- Identification of best practices, implementation science gaps, and monitoring frameworks for dual-disease outcomes.

- Strengthened multi-sectoral partnerships between HIV, NCD, mental health, and aging programmes.

Scope for action: how does the theme address possible and necessary action to be undertaken in the response to AIDS, rather than purely theoretical or academic issues?

To sustain the gains of the HIV response and ensure health for all, we must evolve from a vertical, infection-focused approach to a comprehensive, life-course perspective. This thematic session will provide a platform to advance policies, programmes, and research that embed HIV chronic care within a unified framework for communicable and non-communicable diseases—ultimately improving quality of life, reducing health inequities, and building resilient health systems for the future.

[End of document]