

11 December 2014

**35th Meeting of the UNAIDS Programme Coordinating Board
Geneva, Switzerland
9-11 December 2014**

Decisions

The UNAIDS Programme Coordinating Board,

Recalling that all aspects of UNAIDS work are directed by the following guiding principles:

- Aligned to national stakeholders' priorities;
- Based on the meaningful and measurable involvement of civil society, especially people living with HIV and populations most at risk of HIV infection;
- Based on human rights and gender equality;
- Based on the best available scientific evidence and technical knowledge;
- Promoting comprehensive responses to AIDS that integrate prevention, treatment, care and support; and
- Based on the principle of non-discrimination;

Agenda item 1.1: Opening of the meeting and adoption of the agenda

1. *Adopts* the agenda;

Agenda item 1.2: Consideration of the report of the thirty-fourth meeting

2. *Adopts* the report of the 34th meeting of the UNAIDS Programme Coordinating Board, as revised;

Agenda item 1.3: Report of the Executive Director

- 3.1 *Takes note of and welcomes* the report of the Executive Director;
- 3.2 *Recalls* decision point 7 of the 34th meeting of the Programme Coordinating Board;
- 3.3 *Reaffirms* the UNAIDS vision of the Three Zeros and the strategic directions in the current UNAIDS 2011-2015 Strategy;
- 3.4 *Takes note* of the new data and analysis in recent UNAIDS reports (the Gap report, Fast Track report and Cities report) which provide compelling evidence for accelerated investment and action in the next five years, based on regional variations, to enable countries to end the AIDS epidemic by 2030;
- 3.5 *Requests* the Executive Director to undertake a multi-stakeholder consultative process to update and extend the UNAIDS 2011-2015 Strategy through the fast track period

2016-2021 to align it with the resolution on the Quadrennial comprehensive policy review (QCPR) of operational activities for development (67/226), taking into account the 2011 Political Declaration on HIV and AIDS and ongoing discussions on the post-2015 Sustainable Development Goals, and report back on this process at the 36th Programme Coordinating Board, and to present on that basis an updated Strategy and UBRAF, for decision at the 37th Programme Coordinating Board;

Agenda item 1.4: Report by the NGO representative

4.1 *Recalls* the decisions from previous UNAIDS Programme Coordinating Board meetings¹ and also recalls Resolution 65/277 of the UN General Assembly - the Political Declaration on HIV and AIDS: Intensifying our Efforts to Eliminate HIV and AIDS, July 2011², on the importance of supporting low and middle-income countries to scale-up access to essential medicines;

4.2 *Requests* the Joint Programme, working with relevant partners, to produce a synthesis report of existing research and literature³ on intellectual property (IP)-related and other factors impacting the availability, affordability, and accessibility of treatment and diagnostics for HIV and co-infections in low and middle-income countries, including the following provisions in articles 71 a and b of the 2011 Political Declaration, which state:

- a. The use, to the full, of existing flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights specifically geared to promoting access to and trade in medicines, and, while recognizing the importance of the intellectual property rights regime in contributing to a more effective AIDS response, ensure that intellectual property rights provisions in trade agreements do not undermine these existing flexibilities, as confirmed in the Doha Declaration on the TRIPS Agreement and Public Health, and call for early acceptance of the amendment to article 31 of the TRIPS Agreement adopted by the General Council of the World Trade Organization in its decision of 6 December 2005;
- b. Addressing barriers, regulations, policies and practices that prevent access to affordable HIV treatment by promoting generic competition in order to help to reduce costs associated with life-long chronic care and by encouraging all States to apply measures and procedures for enforcing intellectual property rights in such a manner as to avoid creating barriers to the legitimate trade in medicines, and to provide for safeguards against the abuse of such measures and procedures;

and present it to the Programme Coordinating Board in 2015 for its consideration;

4.3 *Urges* UNAIDS, together with other relevant partners, to intensify technical support to the Governments of low-and middle-income countries aimed to address, wherever appropriate, any IP-related and other barriers related to availability, affordability and accessibility of up-to-date treatment and diagnostics of HIV and co-infections,

¹ Including Decision 12 from the 14th meeting of the PCB, Decision 5.3 from the 15th meeting of the PCB, Decision 7.15 from the 18th meeting of the PCB, decision 3.8 from the 19th meeting of the PCB, and Decision 6.1 from the 30th meeting of the PCB.

² Including paragraphs 31, 36, 71 and 72 of that Declaration.

³ Building upon such analysis that has been done by relevant organizations including the WHO, UNDP, UNCTAD and the report of the UN Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health.

including through the implementation of TRIPS flexibilities, and recognizes the importance of increasing the capacity of UNAIDS to undertake this work;

- 4.4 *Requests* UNAIDS to intensify its cooperation and practical coordination with WTO and WIPO on issues around public health, intellectual property and trade to foster the affordability, accessibility and availability of treatment and diagnostics for HIV and co-infections in low and middle-income countries;
- 4.5 *Requests* UNAIDS in collaboration with relevant partners, utilizing their technical expertise, to further develop collaborative mechanisms for price reductions to increase access while securing quality products;

Agenda item 3: Update on the AIDS response in the post-2015 development agenda

- 5.1 *Takes note* of the report;
- 5.2 *Reaffirms* its commitment to ending the AIDS epidemic as a public health threat by 2030, as agreed at the 34th meeting of the Board and welcomes, in this regard, the report of the Open Working Group of the General Assembly on Sustainable Development Goals and its Goal 3 'Ensure healthy lives and promote well-being for all at all ages', in particular target 3.3 to 'by 2030 end the epidemics of AIDS, tuberculosis, malaria...';
- 5.3 *Encourages* Member States to advocate for the decisions of the Board pertaining to the post-2015 development agenda to be fully reflected in the final documents on the post-2015 development agenda, including in the outcome document of the Third International Conference on Financing for Development, as appropriate;
- 5.4 *Recognizes* that ending the AIDS epidemic by 2030 can only be achieved if no one is left behind and therefore encourages Member States to advocate for a sustainable transformative, inclusive and ambitious post-2015 development agenda;
- 5.5 *Recognizes* the need to further analyze and assess the ability of the UN system to respond to challenges of the post-2015 era and emphasizes the value of the experience of the Joint Programme in this regard, particularly in relation to multisectoral collaboration and issue-specific partnerships and its inclusive governance model;
- 5.6 *Recognizes* that the Joint Programme serves as a useful common platform for accountability for ending the AIDS epidemic;

Agenda item 4: Follow-up to the thematic segment from the 34th Programme Coordinating Board meeting:

- 6.1 *Takes note* with appreciation of the summary report of the Programme Coordinating Board thematic session on addressing the social and economic drivers of HIV through social protection;
- 6.2 *Recognizes* the need to strengthen action to address the social and economic drivers of HIV in order to realize the goal of ending the AIDS epidemic, and calls upon UNAIDS to connect, in the post-2015 agenda, HIV with the eradication of extreme poverty and inequality and the promotion of human rights, dignity for all and social protection, including the right to the highest attainable standard of health;

6.3 *Encourages* the Joint Programme, working collaboratively through its Interagency Task Team on Social Protection, Care and Support and with other partners, including the Global Fund, within national frameworks aiming to develop and strengthen social protection systems and consistent with ongoing efforts towards universal health coverage and access, to:

- a. *Facilitate* country-level dialogues on ending the AIDS epidemic, extreme poverty and inequality, and conduct HIV and social protection assessments, aligned to the Fast Track strategy, to inform a new investment approach to mainstreaming HIV in different sectors, in order to meet the specific needs of people living with, most affected by and at risk of HIV;
- b. *Scale-up* and progressively broaden in scope and depth sustainable social protection programmes that enhance HIV prevention, treatment, care and support outcomes for vulnerable families and individuals. This may include a variety of evidence-based HIV-sensitive and HIV-specific cash transfer programmes, with linkages to care and support, as appropriate, and other development synergies, including insurance programmes, nutritional support, housing, education, employment and economic empowerment, as a critical contribution to combination prevention and treatment adherence efforts that benefit people living with HIV, women and girls, orphans and other vulnerable children, and other key populations⁴;
- c. *Strengthen* existing efforts to advance research in social protection, with full involvement of impacted countries, and promote the use of evidence-based, action-oriented recommendations that address the social and economic drivers of HIV and connect the movements to end the AIDS epidemic, extreme poverty and inequality;
- d. *Build* social protection literacy for people living with HIV, key populations⁵, women's organizations, young people, including orphans and other vulnerable children, and broader civil society to increase access to social protection services;
- e. *Continue* the strengthening and promotion of the Greater Involvement of People Living with HIV (GIPA) principle in social protection action, including active participation of people living with HIV, vulnerable and other key populations⁶, in defining priorities and implementing HIV-sensitive programmes and assuring that social protection services that are offered are free of stigma and discrimination;

⁴ As defined in the UNAIDS 2011-2015 Strategy 'Getting to Zero', footnote n. 41: 'Key populations, or key populations at higher risk, are groups of people who are more likely to be exposed to HIV or to transmit it and whose engagement is critical to a successful HIV response. In all countries, key populations include people living with HIV. In most settings, men who have sex with men, transgender people, people who inject drugs and sex workers and their clients are at higher risk of exposure to HIV than other groups. However, each country should define the specific populations that are key to their epidemic and response based on the epidemiological and social context'.

⁵ *Ibid.*

⁶ *Ibid.*

Agenda item 5: Retargeting process for universal access

- 7.1 *Takes note* of the progress made by regions and countries in setting global and national targets, working to further refine and finalize for presentation and consideration at the 37th Programme Coordinating Board, as reflected in the proposed updated UNAIDS Strategy;
- 7.2 *Calls* on Member States to take steps to implement the national HIV prevention and treatment targets, including accelerating access to HIV treatment while ensuring equity and human rights, and using WHO guidelines as a basis to reach the 90-90-90 treatment targets;
- 7.3 *Requests* the Joint Programme to support countries in ensuring equity and uninterrupted, non-discriminatory access to HIV treatment, prevention, care and support to all people who need it by 2020;
- 7.4 *Requests* UNAIDS to support countries in undertaking a comprehensive gap analysis based on ambitious targets set for 2020 towards ending AIDS by 2030;
- 7.5 *Calls* on UNAIDS to urgently specify its 'fast track' prevention, treatment, stigma and discrimination 2020 targets, along with its funding strategy for achieving these targets and a mechanism for tracking progress towards these targets;
- 7.6 *Requests* UNAIDS to set targets to ensure key populations⁷ access treatment and prevention services, with milestones for 2020 towards ending the AIDS epidemic by 2030, and to support countries in setting respective national targets;

Agenda item 6: Gap analysis on paediatric HIV treatment, care and support

- 8.1 *Takes note* of the report and analysis of gaps in children's access to antiretroviral therapy;
- 8.2 *Welcomes and endorses* the strategic directions outlined by UNAIDS for closing the paediatric treatment gap and encourages the Joint Programme to initiate implementation of the outlined steps;
- 8.3 *Calls upon* countries and partners to take immediate steps to implement all relevant strategic directions outlined by UNAIDS for closing the paediatric diagnostic and treatment gap;
- 8.4 *Calls* on countries to ensure women's access to timely and quality antenatal, natal, and postnatal health services and information as a starting point for addressing children's needs;
- 8.5 *Calls* on countries, as part of timely and quality antenatal care, to ensure women's access to voluntary counselling and testing;
- 8.6 *Requests* UNAIDS to gather evidence and analyze the effects of stigma, discrimination and structural barriers on mothers' and children's health, and the need for psycho-social support for children and affected families, in partnership with children and adolescents living with HIV and their caregivers; and to report back at a future Programme Coordinating Board;

⁷ *Ibid*

- 8.7 *Requests* UNAIDS with relevant partners to set up a platform for coordination of paediatric treatment activities which focuses on action at country, regional, and global levels;
- 8.8 *Requests* UNAIDS to provide regular reporting through the UBRAF on concrete actions taken and progress made by countries towards reaching the 90-90-90 targets for children;
- 8.9 *Requests* UNAIDS to provide to a future PCB an updated gap analysis on paediatric HIV prevention, treatment, care and support;

Agenda item 7: Update on actions to reduce stigma and discrimination in all its forms

- 9.1 *Takes note* of the report;
- 9.2 *Requests* the Joint Programme to support Member States and civil society in accelerating efforts to ensure enabling legal and social environments where everyone, including key populations⁸ and other marginalized populations, can access HIV services; and provide a report at a future meeting of the Programme Coordinating Board;
- 9.3 *Calls* on Member States to ensure that any mechanism for measuring and tracking progress on interventions to address stigma and discrimination draws from the results of the People Living with HIV Stigma Index and the National Composite Policy Index, with assistance and support from UNAIDS, and builds on Decision 7.7 of the 26th Programme Coordinating Board on improving stigma indicators for measuring progress at global, national and programmatic levels;

Agenda item 8: Next Programme Coordinating Board meetings and themes

- 10.1 *Agrees* that the themes for the 36th and 37th Programme Coordinating Board meetings be:
 - a. *HIV in emergency contexts* (36th);
 - b. *Shared responsibility and global solidarity for an effective, equitable and sustainable HIV response for the post-2015 agenda: Increasing domestic funding to ensure a comprehensive and sustained HIV response, including ensuring domestic funding that respects the GIPA principle and addresses the needs of key populations⁹, including women and girls, and other vulnerable groups, in line with national epidemiological contexts* (37th); and
 - c. *HIV in prisons and other closed settings* be considered as a regular agenda item at the Programme Coordinating Board meeting (37th);
- 10.2 *Requests* the Programme Coordinating Board Bureau to take appropriate and timely steps to ensure that due process is followed in the call for themes for the 38th and 39th Programme Coordinating Board meeting;

⁸ *Ibid.*

⁹ *Ibid.*

10.3 *Agrees* the dates for the 40th (27-29 June 2017) and the 41st (12-14 December 2017) meetings of the Programme Coordinating Board;

10.4 *Agrees* that the dates for the 37th PCB meeting will be 26-28 October 2015;

Agenda item 9: Election of officers

11. *Elects* Zimbabwe as Chair, Switzerland as Vice-Chair and Ukraine as Rapporteur, for the period 1 January to 31 December 2015, and approves the composition of the Programme Coordinating Board NGO delegation.

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