

# REPORT BY THE NGO REPRESENTATIVE

## Engagement, Evidence and Impact: 25 years of the NGO Delegation to the UNAIDS PCB

**Additional documents for this item:** N/A

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

90. *Recall* previous decision points (from the 2012 meeting of the PCB when the evaluation report was submitted, plus other recent and relevant decision points relating to civil society engagement)<sup>1</sup>;
91. *Recognize* that meaningful involvement of communities and civil society is central and a prerequisite for an effective HIV response on the path to end AIDS<sup>2</sup>;
92. *Recognize* the value, contribution, effectiveness and impact of the NGO Delegation at the PCB as best practice, particularly in bringing to light urgent concerns faced by people living with HIV, key populations, women, young people and migrants, for immediate attention and action;
93. *Take note of* the report;
94. *Call on* Member States and the Joint Programme to affirm the NGO Delegation as an integral component of the governance of the PCB and to ensure an enabling environment for its continued meaningful engagement, representation of authentic community voices and perspectives, and outreach to its community and civil society constituencies;
95. *Urge* Member States and the Joint Programme to ensure full and meaningful participation of civil society representation at the PCB through the NGO Delegation, including a fully-funded Communication and Consultation Facility;
96. *Request* the Joint Programme to ensure that strategies for community and civil society engagement are enshrined in the next Global AIDS Strategy;
97. *Build on* lessons learned from community and civil society engagement, particularly key populations and people living with HIV in the global, regional, national, and local HIV responses, including, but not limited to:
  - a. the importance of bringing embodied knowledge of HIV and lived experiences to decision-making processes;
  - b. the knowledge about the needs of people living with and affected by HIV, and what works and why other interventions do not work at country level;
  - c. the efficiency in planning and utilization of resources in HIV programming;
  - d. the effectiveness of community-led HIV programming and service delivery;

**Cost implications for implementation of the decisions:** None

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<sup>1</sup> Decision Points 4.2, 4.5, 7.4, 7.5, 8.2 and 8.3 of the 45<sup>th</sup> PCB Meeting; Decision Points 7.5 and 10.3 of the 43<sup>rd</sup> PCB Meeting; Decision Points 4.3, 4.4, 7.2 and 7.3 of the 41<sup>st</sup> PCB Meeting.

<sup>2</sup> Paragraphs 21 and 29 of the United Nations Political Declaration on Ending AIDS.

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## Dedication

This report is dedicated to everyone—those still with us and those who have passed away— who has served on or supported the NGO Delegation, from the first meeting of the UNAIDS PCB to the present day. You are remembered and your contribution is acknowledged and deeply appreciated.

## Acronyms and abbreviations

<b>AIDS</b>	<b>Acquired immunodeficiency syndrome</b>
<b>APN+</b>	Asia-Pacific Network of People Living with HIV
<b>CSEM</b>	Civil Society Engagement Mechanism
<b>ECOSOC</b>	(United Nations) Economic and Social Council
<b>GAP</b>	Global Action Plan for Healthy Lives and Well Being for All
<b>GIPA</b>	Greater Involvement of People Living with HIV
<b>HIV</b>	<b>Human immunodeficiency virus</b>
<b>Global Fund</b>	Global Fund to Fight AIDS, Tuberculosis and Malaria
<b>GNP+</b>	Global Network of People Living with HIV
<b>ICASO</b>	International Council of AIDS Service Organizations
<b>INPUD</b>	International Network of People Who Use Drugs
<b>NGO</b>	Nongovernmental organization
<b>NSWP</b>	Global Network of Sex Work Projects
<b>PCB</b>	Programme Coordinating Board
<b>SDGs</b>	Sustainable Development Goals
<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>UBRAF</b>	Unified Budget, Results and Accountability Framework
<b>UNAIDS</b>	Joint United Nations Programme on HIV and AIDS
<b>UNDP</b>	United Nations Development Programme
<b>UNODC</b>	United Nations Office on Drugs and Crime
<b>WHO</b>	World Health Organization

## Introduction

1. In 1995, the Joint United Nations Programme on HIV and AIDS (UNAIDS) was established, building on the principles and lessons of the Global Programme on AIDS.<sup>3</sup> In an unprecedented move within the UN system, the new programme included a Nongovernmental Organization (NGO) Delegation in its governance structure, the Programme Coordinating Board (PCB).
2. This report marks the 25th anniversary of the NGO Delegation to the UNAIDS PCB. It takes stock of the engagement, evidence and impact of the Delegation to date, highlighting examples of key actions and results. It also makes recommendations for the future, in a context where responses to HIV by key populations,<sup>4</sup> people living with HIV, women, young people and migrants—referred to in this report as "communities and civil society"—are more vital than ever. The report notes with deep concern that the political space, human rights, financial viability and very existence of those organizations and networks are under threat.
3. The NGO Delegation produced the NGO Report 2020 by using three methodologies.
  - **Literature review.** Over 100 resources from a range of sources (such as the minutes of meetings, governance guidelines and evaluation reports) were reviewed. Particular use was made of the UNAIDS PCB online archive<sup>5</sup> (including the Decision Points and background papers for all 46 meetings held to date) and the NGO Delegation archive (including 26 NGO Reports<sup>6</sup> and 30 post-PCB meeting communiqués,<sup>7</sup> with the texts of interventions made by NGO Delegates).
  - **Key informant interviews.** Seventeen semistructured interviews were conducted with a range of stakeholders of relevance to the work of the NGO Delegation. These included representatives of past and current NGO Delegations, NGO Observers, Member States, the UNAIDS Secretariat and UNAIDS Cosponsors. [See Annex 1 for a list].
  - **Survey:** An e-survey was produced in Arabic, Chinese, English, French, Russian and Spanish. It was disseminated to community and civil society stakeholders with direct experience of the NGO Delegation—for example, as a past or current delegate, a constituent of the Delegation or an NGO Observer. A total of 50 responses were received (see Annex 2 for a profile of the respondents).
4. Draft texts of the NGO Report 2020 were reviewed by members of the NGO Delegation, as well as by an 11-member panel of community and civil society stakeholders from all 5 UNAIDS regions.<sup>8</sup> The members of the latter were selected based on their experience

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<sup>3</sup> Global Programme on AIDS 1987-1995: Final Report, WHO, 1997; and UNAIDS: The First Ten Years 1996-2007, UNAIDS, 2008.

<sup>4</sup> Key populations are defined according to: "UNAIDS considers gay men and other men who have sex with men, sex workers, transgender people and people who inject drugs as the four main key population groups, but it acknowledges that prisoners and other incarcerated people also are particularly vulnerable to HIV and frequently lack adequate access to services." See UNAIDS Terminology Guidelines. Geneva: UNAIDS; 2015.

<sup>5</sup> UNAIDS Programme Coordinating Board Archive, UNAIDS (<https://www.unaids.org/en/whoweare/pcb>)

<sup>6</sup> NGO Reports, NGO Delegation to the UNAIDS PCB (<https://unaidspcbngo.org/resources/ngo-reports/>)

<sup>7</sup> Communiqués, NGO Delegation to the UNAIDS PCB (<https://unaidspcbngo.org/resources/communiques/>)

<sup>8</sup> The members of the review panel were: Tendayi Westerhoff and Marc Ndayiragije (Africa); Greg Gray and Gaj Gurung (Asia-Pacific); Ferenc Bagyinszki and Pavel Aksenov (Europe); Alessandra Nilo

and knowledge of the work of the NGO Delegation and its constituents.

## The UNAIDS PCB

5. UNAIDS was established under Resolution 1994/24 of the United Nations Economic and Social Council (ECOSOC). Its purpose was stated as being to “undertake a joint and cosponsored United Nations Programme on HIV/AIDS, on the basis of co-ownership, collaborative planning and execution, and an equitable sharing of responsibility”. The Programme had 6 (now 11) UN Cosponsors.
6. The composition of the PCB was agreed through subsequent ECOSOC decisions (1995/223 and 1995/2). The Board was to act as the governing body on all issues concerning policy, strategy, finance and monitoring and evaluation. It is currently made up of representatives of 22 Member States and 11 Cosponsors.
7. The UNAIDS PCB also includes NGO representatives (5 members and 5 alternates) from different geographic regions: Africa, Asia-Pacific, Europe, Latin America and the Caribbean, and North America.<sup>9</sup> According to the PCB’s Modus Operandi, the NGO Delegates can participate in the Board’s discussions, but they do not have the right to vote.<sup>10</sup>

*“The position of NGOs on the UNAIDS Programme Coordinating Board is very important for the effective inclusion of community voices in the key global policy forum for HIV and AIDS. PCB NGOs represent the perspectives of civil society, including people living with HIV, within UNAIDS policies and programming.”*

UNAIDS Governance Handbook, UNAIDS

## The NGO Delegation

8. The mission of the NGO Delegation is: “To bring forward the perspectives and expertise of people living with, affected by, most at risk of and vulnerable to HIV and AIDS, as well as civil society, to ensure that UNAIDS is guided by rights-based, equitable and gender-based approach to guarantee access to comprehensive HIV prevention, treatment, care and support for all.”<sup>11</sup> The NGO Delegation fulfils this mission by:
  - seeking broad input from civil society;
  - increasing the participation of people living with HIV;
  - helping to set the PCB agenda;
  - studying documents;
  - lobbying other PCB colleagues;
  - recruiting and mentoring new delegates;
  - collaborating with observer NGOs;
  - participating in working groups;
  - attending meetings;
  - and reporting back to civil society.
9. The Delegation has a set of principles that it endeavours to enact in all aspects of its work. These include supporting the greater involvement of people living with HIV

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and Ainsley Reid (Latin America and the Caribbean); and Nadia Rafif, George Ayala and Robin Montgomery (North America).

<sup>9</sup> UNAIDS Governance Handbook, UNAIDS, 2020.

<sup>10</sup> Modus Operandi of the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS (UNAIDS) (Revised), UNAIDS, December 2011.

<sup>11</sup> Our Mission, Vision and Code of Conduct, NGO Delegation to the UNAIDS PCB.

(GIPA), a rights-based approach, nondiscrimination, and the active involvement of key and vulnerable populations.

10. To date, the NGO Delegation has involved a total 108 delegates from 85 organizations from across the world. As people and professionals, the delegates have brought rich diversity, including in terms of their age, gender identity, HIV status, key and vulnerable community and technical expertise. They are selected through an open call for applications and undergo a screening and interview process, based on the requirements outlined in Terms of Reference. The delegates are formally approved by the PCB and serve a term of two years, with a possible extension to three (see Annex 3 for a list of NGO delegates since 1995).
11. The NGO Delegation has participated in all 46 PCB meetings to date, bringing unique voices, perspectives and lived experiences to the table. It has also been a stakeholder in all of UNAIDS' significant governance events—from the development of major policies to the selection of new Executive Directors, the design of evaluations and the approval of Unified Budget, Results and Accountability Frameworks (UBRAFs).
12. The NGO Delegation works intensively in the lead-up to, during and after PCB meetings. Before PCB meetings, its members consult their regional constituencies to seek input into agenda items and the Delegation's positions. It also participates in a systematic set of premeeting briefings with NGO Observers, Member States, Cosponsors and the UNAIDS Secretariat. During PCB meetings, the NGO Delegation engages in both the formal plenary process and the informal "corridor discussions", and participates in drafting room discussions where Decision Points are refined.
13. The Delegation also remains actively engaged between PCB meetings. It does so through ongoing communication and consultation with communities and civil society organizations and networks at national, regional and global levels. It is also a member of the PCB Bureau and it participates in PCB Working Group discussions on forthcoming agenda items.
14. An important part of the Delegation's work involves the production of an annual NGO Report, the first of which was presented at the 4th PCB meeting in 1997. These publications highlight priority issues for communities and civil society but which might be unknown or neglected by other sectors. The subjects have ranged from GIPA (in 2000) to stigma and discrimination (in 2010), sustainable funding for community responses (in 2016) and Universal Health Coverage (in 2019). Each report is based on a participatory research and consultation process (see Annex 4 for a list of NGO Reports).
15. The NGO Delegation has undergone two independent evaluations, in 2007 and 2012. Both led to strengthened practices within the Delegation, while the 2012 evaluation also contributed to the establishment of a Communication and Consultation Facility. It is currently hosted by the Asia Pacific Network of People Living with HIV and (APN+) and it provides the Delegation with high-quality and independent support. The Facility's main goal is to facilitate the internal management of the Delegation and its communication and consultation, both with wider civil society and with the UNAIDS Secretariat, Member States and Cosponsors. Its terms of reference include attention to: internal communications; external communications; Delegation recruitment; orientation of new delegates; NGO Report coordination; document storage; website and social media maintenance; travel arrangements; contract management of consultants; coordination of Delegation participation in PCB meetings; support for accountability processes; facilitation of constituency engagement; coordination of Delegation strategic planning and retreats (essential opportunities to meet together, build a team and strategize,

beyond the twice-yearly PCB meetings); and support in policy analysis and functions.<sup>12</sup>

16. For further information about the NGO Delegation, see <https://unaidspcbngo.org/>.

### Overview of key contributions

17. Over the past 25 years, there has been extensive evidence of the NGO Delegation's positive impact on the work, discussions and decisions of the UNAIDS PCB. Examples shown in this report have been identified from three major sources: the documented Decision Points of the 1st to the 46th PCB meetings; the NGO Delegation's communiqués for the 22nd to the 46th PCB meetings; and the key informant interviews and survey conducted for the NGO Report 2020.
18. It is important to note that this report shares examples of results to which the NGO Delegation is considered to have made a significant or catalytic contribution, often in collaboration with other PCB members, NGO Observers and wider civil society. It does not claim that all of these examples are solely attributable to the Delegation.
19. The survey conducted for the 2020 NGO Report found that 64% of respondents consider that, overall, the NGO Delegation has made a "major difference" to the UNAIDS PCB, while 28% consider it has made "some difference".<sup>13</sup>
20. Respondents were also asked to rank the level of contribution which the Delegation has made to specific aspects of the work of the PCB.<sup>14</sup> The highest level of "major contribution" was seen in relation to "bringing evidence, attention and passion to neglected issues for the PCB" (selected by 84% of respondents). This was followed by: "supporting UNAIDS to evolve the response to HIV and connect the response to wider issues and processes" (79%); "bringing the face of HIV to the PCB and advocating for communities/civil society's priority issues" (78%); and "bringing a regional perspective to the PCB—highlighting community/civil society issues from specific geographic areas" (71%). The lowest levels of "major contribution" were seen for "contributing to the effectiveness and accountability of the PCB as a global health governance structure" (63%) and "influence the governance structures of other global health institutions" (47%).

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<sup>12</sup> UNAIDS PCB NGO Delegates' Manual, NGO Delegation to the UNAIDS PCB.

<sup>13</sup> E-survey question 5: In your opinion, overall, has the NGO Delegation made a difference to the UNAIDS Programme Coordinating Board? [Please select one option]. Total of 50 respondents.

<sup>14</sup> E-survey question 6: In your opinion, how much of a contribution has the NGO Delegation made to the UNAIDS Programme Coordinating Board? [Please choose one option for each contribution]. Total of 50 respondents.



### NGO Delegation contributions to the UNAIDS PCB, as identified by survey respondents

The survey for the NGO Report 2020 asked respondents to identify contributions—e.g. to agenda items, discussions and decisions—made to the PCB by the NGO Delegation.<sup>15</sup> These are examples of the responses.<sup>16</sup>

*“Issues of discrimination in health care”.*

Antoinette Barton-Gooden, respondent from Latin America and the Caribbean

*“Reducing the impact of AIDS on children and youth”.*

Michelle Madamombe, respondent from Africa

*“Essential for ensuring civic space, for building accountability to civil society, for influencing Member States, and for holding open a key leadership space in the HIV response”.*

Tyler Crone, respondent from North America

*“The presence of the NGO Delegation serves as a beacon of hope, particularly in this time when civil society voices are being silenced by several state and non-state actors”.*

Anonymous, respondent from Asia Pacific

*“The December 2011 PCB was a major milestone in terms of bringing attention to the issue of HIV criminalization during the Legal Environment thematic. Since then, UNAIDS, UNDP and others have supported civil society in advocating strongly against such laws”.*

Edwin Bernard, respondent from Europe

*“It has directly shown the importance of including and listening to young positives in decision-making spaces.”*

Miguel Subero, respondent from Latin America and the Caribbean

*“Other institutions like the Global Fund, UNITAID have brought on their governance structures CSOs and community representatives”.*

Lillian Mworeko, respondent from Africa

*“The NGO Delegation’s Report remains a critical tool for ensuring that live issues affecting communities living with and affected by HIV are kept on the agenda of the PCB and mainstreamed into the work of the Joint Programme”.*

Anonymous, respondent from North America

*“Highlighting region-specific issues, particularly the need to continue focusing on key populations in the Asia-Pacific region”.*

Anonymous, respondent from Asia Pacific

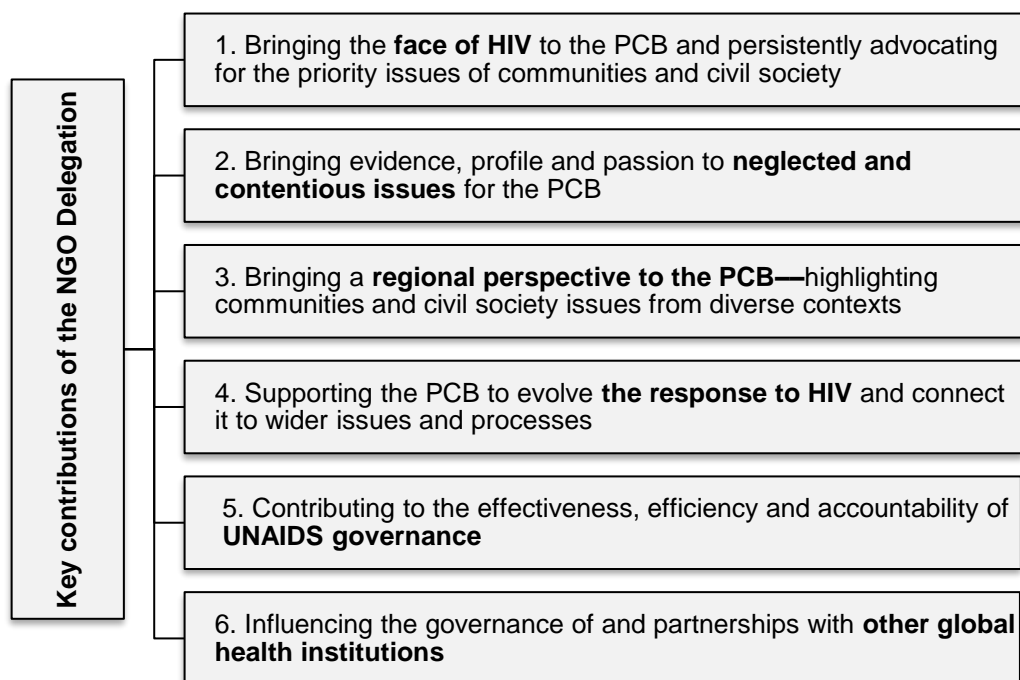
*“Essential to ensure Member States support to UNAIDS when it was at risk (funding, problems in leadership ...) through its commitment, advocacy skill and years of experience in the response”.*

Anonymous, respondent from Europe

22. Based on the results of the survey and the other methodologies used for the NGO Report 2020, the following pages focus on six selected examples of the NGO Delegation’s contributions to the UNAIDS PCB:

<sup>15</sup> E-survey question 7: Are there any specific examples of the contributions listed in Question 6 that you would like to share? For example, are there any themes or agenda items where the NGO Delegation made a particular difference to UNAIDS? [Please comment]. Total of 40 respondents.

<sup>16</sup> Permission was sought from the respondents to the survey for their responses to be published in the NGO Report. E-survey question 10: Do you consent to be quoted in the 2020 NGO Report? [Please select one option].



### Key contribution 1: Bringing the face of HIV to the PCB and persistently advocating for the priority issues of communities and civil society

23. A fundamental role of the NGO Delegation is to bring the *lived reality of HIV* to the highly political deliberations of the UNAIDS PCB. Without such a presence, there is a risk of Board discussions becoming overly administrative or theoretical, without a sound understanding of the practical implications of the policy decisions being made.

24. Over 25 years, the NGO Delegation has been represented by, among others, people who are: living with HIV; sex workers; people who inject drugs; gay, bisexual or other men who have sex with men; transgender people; young people; women; and people with experience in specific areas, such as migration, prisoners and sexual and reproductive health and rights (SRHR). At all times, the majority of the members have been people living with HIV and/or key and vulnerable populations. Each representative has brought their personal and professional experiences, as well as the issues and challenges of their respective constituencies. In combination, they have contributed integrity and legitimacy to the Delegation’s work.

*“Right from the start, our job was to shout out —on behalf of all those not in the room whose voices needed to be heard and whose concerns needed to be addressed.”*

Teresita Bagasao, NGO Delegate for Asia-Pacific, 1995–1996

*“The NGO Delegation influences the whole dynamic of the PCB. When you’re sitting opposite people who are bearing witness to the challenges of their communities, you cannot ignore them. They bring to the table issues that, otherwise, wouldn’t be there. They remind us of the reality.”*

Andy Seale, World Health Organization

25. A fundamental issue championed by the NGO Delegation is the meaningful engagement of communities and civil society in the response to HIV. The Delegation has repeatedly not only raised the issue, but pushed for Decision Points. For example,

during PCB meetings in 2007-2009,<sup>17</sup> it secured a raft of measures to increase the engagement of and attention to communities and civil society in the PCB and across wider UNAIDS processes. Examples included decisions for: UNAIDS to strengthen its focus on human rights and gender; develop a technical support strategy (including communities and civil society providers); and develop a partnership strategy, with measurable objectives and distinct strategies for working with both civil society and people living with HIV.

26. At the 38th meeting of the PCB in 2016, a thematic meeting on the role of communities enabled the NGO Delegation to organize the participation of community-based and led groups in the PCB, enabling them to showcase their work and share their expert knowledge. In a follow-up session at the 39th PCB meeting, a series of Decision Points were agreed that affirmed the role of communities and sought commitment to action, such as:

*“5.3 Encourages Member States to:*

*a. Identify, address and overcome regulatory and cultural barriers to the effective involvement of civil society and ensure the meaningful inclusion of civil society, including people living with HIV and other key populations, young people and women at all levels of planning, as well as national and donor policy and programming frameworks, to ensure full involvement, quality participation and influence in the design, implementation and evaluation of policies and programmes.”*<sup>18</sup>

27. The NGO Delegation has consistently championed the role of **community-based and led responses**, specifying that they should not only be respected, but adequately and sustainably resourced. In 2001, the 11th PCB meeting saw the Delegation promote the need for more effective **funding for communities and civil society**, while the 17th PCB meeting saw it advocate for a long-term strategy to resource the communities/civil society sector.
28. At the 30th PCB meeting, the NGO Report 2012 used a review of evidence and case studies (from Brazil, Democratic Republic of Congo and Pacific Islands) to set out the disastrous impact on communities of decreased funding for HIV from bilateral and multilateral sources, alongside the slow progress on domestic investment.
29. The subject of financing has been revisited in recent years, including at the 39th PCB meeting, in 2016 where the NGO Delegation presented a report titled *An unlikely ending: ending AIDS by 2030 without sustainable funding for the community-led response*. Despite complex discussions among Board members, the Delegation succeeded in securing an extensive set of Decision Points which called on Member States to address the barriers to domestic funding of community-led organizations. They also called on UNAIDS to: analyse the barriers to funding from international and private donors; sustain support for community-led key population responses (including in middle-income countries); and adapt existing mechanisms to support Member States to track their investments in community-led responses.<sup>19</sup>
30. Further attention was drawn to the issue of financing at the 43rd PCB meeting in 2018, where the NGO Delegation used an agenda item on best practices for effective funding of community-led responses to highlight key targets set out in the 2016 Political

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<sup>17</sup> For example: Agenda Item 4: Increased Involvement of Civil Society in the PCB, 23rd PCB Meeting, 2008; and Agenda Item 2: Second Independent Evaluation, 25th PCB Meeting, 2009.

<sup>18</sup> Agenda Item 4: Follow-up to the Thematic Segment of the 38th PCB Meeting: The Role of Communities in Ending AIDS by 2030, 39th PCB Meeting, 2016.

<sup>19</sup> Agenda Item 7: Report by the NGO Representative, 39th PCB Meeting, 2016.

Declaration on Ending AIDS.<sup>20</sup> The agreed Decision Points included:

*“10.3. Encourages Member States to:*

*a. Dedicate maximum available resources to fulfilling the right to the enjoyment of the highest attainable standard of health, including the 30% coverage by community-led HIV programmes and 6% of HIV financing towards social enablers, as agreed in the 2016 Political Declaration on Ending AIDS;*

*b. Review and amend relevant laws, policies, institutions and mechanisms to create and maintain a safe and enabling environment in which civil society can efficiently support the AIDS response and the achievement of the targets for, and the goal of, ending AIDS by 2030;*

*c. Report on coverage and expenditures using the Global AIDS Monitoring and National AIDS Spending Assessment tools on an annual basis.”<sup>21</sup>*

31. The NGO Delegation has used follow-up discussions on this subject—such as at the 46th PCB meeting in June 2020<sup>22</sup>—to articulate a sense of urgency in the agreement of definitions of and support for community-based and led responses, in particular in the context of the COVID-19 pandemic.
32. The NGO Delegation has continuously profiled the social enablers which, for communities and civil society, “make or break” effective responses to HIV.
33. For example, the Delegation has repeatedly raised and engaged in agenda items on **gender equity**, advocating for targeted attention to women and girls (in their full diversity, including those living with HIV and affected by gender-based violence), while also pushing beyond binary understandings for gender-related policies to include key and vulnerable populations. As an example, the Delegation advocated at the: 16th PCB meeting for attention to the specific sociocultural factors that underlie the vulnerability of women and girls; and 22nd, 23rd and 24th PCBs for understandings of gender to address the needs of men who have sex with men, transgender people, bisexual people, lesbians and sex workers across the gender spectrum.
34. This momentum contributed to the 25th PCB meeting: approving an operational plan in response to the work of the Global Task Force on Women and Girls, Gender Equality and HIV; and agreeing to build on the UNAIDS *Outcome framework 2009–2011* and *Action framework on men who have sex with men and transgender people* to expand comprehensive programmes to reduce HIV transmission among men who have sex with men and transgender people.<sup>23</sup>
35. The Delegation has also cast a spotlight on the harsh reality of **stigma, discrimination and human rights violations** against those most affected by and vulnerable to HIV. For example, the NGO Report 2010 highlighted how universal access to HIV prevention, care, support and treatment and other global targets could not be achieved without action on stigma and discrimination.

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<sup>20</sup> Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030, United Nations General Assembly, June 2016.

<sup>21</sup> Agenda Item 8: Best Practices on Effective Funding Of Community-Led HIV Responses, 43rd PCB Meeting, 2018.

<sup>22</sup> Agenda Item 5: Progress Report On The Establishment Of The Task Team On Community-Led AIDS Responses, 46th PCB Meeting, 2020.

<sup>23</sup> Agenda Item 1.3. Report of the Executive Director, 25th PCB Meeting, 2009.

36. More recently, the NGO Delegation was actively involved in a series of agenda items on stigma and discrimination which, following a proposal presented by the Delegation to the 41st PCB meeting, led to the creation of the Global Partnership for Action to Eliminate All Forms of HIV-related Stigma and Discrimination.<sup>24</sup> The collaboration includes the Global Network of People Living with HIV (GNP+), UN Women, the United Nations Development Programme (UNDP), UNAIDS and the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund). It aims to accelerate global action on stigma and discrimination and close the HIV prevention, testing and treatment gaps.

*“The NGO Delegation has played a significant role in keeping human rights on the PCB agenda. Whether addressing laws and policies, intellectual property barriers, universal health coverage, key populations or stigma and discrimination, it keeps us grounded and shapes our thinking.”*

Ludo Bok, UNDP

37. To support the Global Partnership, the NGO Delegation has helped to ensure that stigma and discrimination remains a regular item on the PCB agenda. For example, deliberations supported by the Delegation at the 45th PCB meeting in 2019 led to relevant Decisions Points, including:

*“8.2 Requests the UNAIDS Joint Programme to:*

*a. Support Member States, civil society, networks of key populations and other partners, including national, regional and international human rights institutions and bodies, to set national targets and programmatic indicators to track progress and report impact of stigma and discrimination reduction programmes in routine monitoring and reporting mechanisms”.*<sup>25</sup>

## **Key contribution 2: Bringing evidence, profile and passion to neglected and contentious issues for the PCB**

38. The NGO Delegation has frequently raised issues which are important for communities and civil society, but which may be overlooked or regarded as sensitive by some stakeholders in the PCB.

39. HIV prevention, for example, requires nuanced understanding of people’s lives, risks and social and sexual behaviours. At times, prevention has been at risk of being deprioritized in favour of discussions about treatment (which may seem more straightforward, with results that are easier to measure). The NGO Delegation has repeatedly advocated not only for renewed and consistent attention to the critical importance of HIV prevention and its structural drivers, but for related strategies to be comprehensive and differentiated. At multiple meetings (e.g. the 16th and 17th meetings of the PCB),<sup>26</sup> the Delegation has emphasized that strategies to intensify HIV prevention should:

- be grounded in human rights,
- ensure gender equality,
- meet the needs of the most vulnerable people,

<sup>24</sup> Global Partnership for Action to Eliminate All Forms of HIV-Related Stigma and Discrimination, GNP+, <https://www.gnpplus.net/our-solutions/global-partnership-for-action-to-eliminate-all-forms-of-hiv-related-stigma-and-discrimination/>

<sup>25</sup> Agenda Item 6: Report on Progress on Actions to Reduce Stigma and Discrimination in All Its Forms, 45th PCB Meeting, 2019.

<sup>26</sup> Agenda Item 3: Intensifying HIV Prevention, 16th PCB Meeting, 2004; and Agenda Item 3: UNAIDS Position Paper: Intensifying HIV Prevention, 17th PCB Meeting, 2005.

- recognize the barriers posed by stigma and discrimination; and
  - be evidence-based.
40. In a thematic session on combination prevention at the 30th PCB meeting in 2012, the NGO Delegation arranged for representatives of communities and civil society to provide first-hand accounts of their experiences in addressing specific aspects of HIV prevention. The NGO Delegation has also resolutely highlighted the needs and concerns of **key and vulnerable populations**, despite such issues sometimes provoking controversy among some other PCB constituencies.
41. For example, when UNAIDS was developing its first-ever Guidance Note on HIV and sex work in 2006–2007,<sup>27</sup> the NGO Delegation collaborated with an NGO Observer (the Global Network of Sex Work Projects, NSWP) to challenge the abolitionist stance set out in the first draft of the Note (which had not benefited from consultation with sex worker communities). The Delegation and NSWP presented counter-evidence from the perspective of sex workers, including those living with HIV. This catalyzed discussions and led to revisions of the draft Note. The final Note, published in 2007, set out a rights-based approach to sex work and HIV, with an emphasis on bodily autonomy (rather than “victimhood”) and economic empowerment (rather than “rescue”). It laid the foundations for a set of vital policies and technical resources, including *Implementing comprehensive HIV/STI programmes with sex workers: practical approaches from collaborative interventions*, which was developed through a collaboration between NSWP and five UNAIDS Cosponsors.<sup>28</sup>
- “Collaborating with the NGO Delegation and using the PCB as a global policy-making platform enabled us to lay the foundations and set the tone for a vibrant, respectful and rights-based UN approach to sex work in the context of HIV.”*

Ruth Morgan-Thomas, the Global Network of Sex Work Projects, NGO Observer
42. Another important example relates to **people who use drugs** and their need for comprehensive, rights-based and community-led HIV programmes. Supported by PCB Observers, such as the International Network of People who Use Drugs, the Delegation has persistently raised this issue over the years. It has advocated for supportive (non-pathologizing) language; evidence-based harm reduction programmes (including needle and syringe and opioid substitution programmes); peer-led outreach; and differentiated support for women who use drugs (including in relation to gender-based violence).
43. That work led to a breakthrough in 2012, when the NGO Delegation brokered a change in the relationship between the community of people who use drugs and the United Nations Office on Drugs and Crime (UNODC). At the time, UNODC was proposing to downgrade its Global HIV Programme (by incorporating it into the Substance Misuse Division). With the support of some Member States, Cosponsors and the UNAIDS Secretariat, the NGO Delegation advocated for an HIV-specific programme in UNODC and affirmed the unique role of affected communities. This contributed to confirmation of the UNODC Global HIV Programme and, in February 2013, the establishment of the UNODC Civil Society Group on Drug Use and HIV. Now in its seventh year, and with funding provided by UNODC, the Group serves as a mechanism to enhance coordination and collaboration between people who use drugs/civil society and the Cosponsor.<sup>29</sup>

<sup>27</sup> Guidance Note on HIV and Sex Work, UNAIDS, April 2007 and updated 2012.

<sup>28</sup> *Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions*, WHO; UNFPA; UNAIDS; NSWP; World Bank; UNDP, October 2013.

<sup>29</sup> UNODC Civil Society Group on Drug Use and HIV: ToRs, UNODC Civil Society Group on Drug Use and HIV.

44. Subsequently, the 35th PCB meeting included a thematic session which focused on the target of reducing new HIV infections among people who inject drugs by half. In a follow-up at the 36th meeting of the PCB, the NGO Delegation successfully advocated for the agreement of a further set of Decision Points, including:

*“8.2 Recognizes the need to strengthen action to address transmission of HIV among people who use drugs, by adopting and implementing comprehensive drug policies that are based on evidence and respect for human rights, that promote the right of everyone to the enjoyment of the highest attainable standard of health, that respect the dignity of all persons, and that are informed by the harm reduction interventions related to HIV and people who use drugs, as enumerated in the WHO, UNODC, UNAIDS Technical Guide for Countries to Set Targets for HIV Prevention, Treatment and Care for Injecting Drug Users and the WHO Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment and Care for Key Populations, in line with national contexts, and further, that HIV services for people who use drugs should be planned, implemented, monitored and evaluated with inclusion of people who use drugs.”<sup>30</sup>*

45. These advocacy efforts have benefitted enormously from the fact that the NGO Delegation includes members who themselves belong to key and vulnerable populations and who represent or are connected to national, regional and global networks of those communities. Those delegates often provide powerful, personal interventions that make a strong impression on other PCB members. In turn, those members and their organizations have gained from their involvement in the PCB, for example by having the opportunity to convey their constituents’ needs and demands to global decision-makers and to advocate for actions in UN fora.
46. Alongside population-specific interventions, the NGO Delegation has successfully highlighted specific aspects of responses to HIV that can cut across various key and vulnerable communities. For example, for the 33rd PCB meeting, it used the NGO Report 2013 to focus on the “equity deficit”, reflected in the disproportionately low access to antiretroviral therapy among key and vulnerable populations living with HIV.
47. Such work supported the NGO Delegation’s ongoing and determined attention to **intellectual property rights** issues. At the 35th meeting of the PCB in 2014, the NGO Delegation presented its *When rights cause wrongs: addressing intellectual property barriers to ensure access to treatment for all people living with HIV* report. This frank and ground-breaking report caused passionate debates and intensive negotiations in the PCB’s plenary and Drafting Room.
48. The NGO Report 2014 catalyzed strong positions among PCB members, including on access to generic drugs, how to achieve a balance between trade and public health agendas, and the role of UNAIDS in such areas. It also showed clearly how systemic barriers prevent access to medicines for vulnerable populations, and influenced important Decision Points, including:

*“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*

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<sup>30</sup> Agenda Item 5: Follow-up to the Thematic Segment from the 35th Programme Coordinating Board Meeting, 36th PCB Meeting, 2015.



*access while securing quality products.”<sup>31</sup>*

49. Other examples of sensitive issues profiled and advanced by the NGO include the sexual and reproductive health rights of people who are most vulnerable to and affected by HIV, including women living with HIV, adolescent girls and young women and people who inject drugs (addressed by the NGO Report 2016, presented at the 38th PCB meeting), as well as older people living with HIV (addressed by decision points at the 40th PCB meeting,<sup>32</sup> following a thematic session subject on HIV and ageing). A further example is **coinfection of HIV and viral hepatitis**. That issue was addressed by the NGO Report 2008, presented at the 22nd PCB meeting, which contributed to a decision that WHO and the UNAIDS Secretariat would explore ways in initiate work among Cosponsors in relation to coinfection and to report back to future PCB meetings.

### Key contribution 3: Bringing a regional perspective to the PCB—highlighting communities and civil society issues from diverse contexts

50. The NGO Delegation has profiled priority issues for specific geographic regions and sociopolitical contexts, reinforcing UNAIDS’ emphasis on the importance of “knowing your epidemic” and highlighting issues that might be neglected at the global level.

*“The NGO Delegation brings together members from the global South and North, as well as from diverse communities and perspectives. The discussions within the Delegation can be very hard—in terms of finding a balance between regions and priorities. However, the result is an informed, shared view, which is one of the Delegation’s major strengths.”*

Mabel Bianco, NGO Delegate for Latin America and the Caribbean (1997 and 2011–2013)

51. The Delegation has highlighted fragile and emergency situations in individual countries. Examples include aggressive policies on drug use (addressed at the 22nd PCB meeting) and human rights abuses against people who use drugs in the Philippines (addressed at the 41st PCB meeting). During and between PCB meetings, the NGO Delegation has also drawn attention to the ongoing public health crisis in Venezuela. Around the 40th meeting of the PCB, a Latin America and Caribbean NGO delegate worked with civil society partners (including Acción Ciudadana Contra el SIDA, a local civil society organization in Venezuela, and ICASO, a global civil society organization and NGO Observer) to urge UNAIDS to address the crisis in access to HIV care and treatment in Venezuela, acknowledge human rights abuses against key populations and support local people living with HIV and civil society organizations.
52. In addition, the Delegation has drawn attention to issues that are of ongoing concern in specific regions. Migration, for example, is a priority for many communities and civil society stakeholders in several regions, including Asia-Pacific. The issue has been the focus of sessions at PCB meetings, including the 24th meeting in 2009 which included a thematic session on “People on the move”. The NGO Delegation participated in the session’s working group and ensured that communities and civil society representatives participated in all the session’s panels. The Delegation successfully pushed for Decision Points calling on the UNAIDS Secretariat and Cosponsors to facilitate the incorporation of mobile populations into regional and national HIV strategies, and to support governments in harmonizing laws and policies on HIV testing to ensure adherence to

<sup>31</sup> Agenda Item 1.4: Report by the NGO Representative, 35th PCB Meeting, 2014.

<sup>32</sup> Agenda Item 5: Follow-up to the Thematic Segment from the 39th Programme Coordinating Board Meeting, 40th PCB Meeting, 2017.



international standards.<sup>33</sup>

53. The NGO Report presented at the 43rd PCB meeting was titled *People on the move—key to ending AIDS*. Like all NGO Reports, that report was developed through an extensive consultation process, which in that case involved a literature review, 27 interviews with people on the move, 83 survey responses, a focus group and the collection of 12 good-practice case studies. After intensive negotiations in the PCB Drafting Room, the Report led to landmark Decision Points, which included:

*“4.6 Calls on the Joint Programme to support Member States, in partnership with communities and civil society organizations and other relevant partners, in accordance with national law, context and priorities, to:*

*a. Support access to HIV prevention, treatment, care and support services, for migrant and mobile populations, as well as refugees and crisis-affected populations, including, as appropriate, through strengthening international cooperation;*

*b. Contribute to the generation and improved availability of national, regional and local data on HIV and migration to improve the evidence base relative to the needs of mobile populations;*

*c. Review and adapt laws, policies and practices that prevent migrant and mobile populations, as well as refugees and crisis-affected populations from accessing lifesaving treatment, with a particular focus on key populations.”<sup>34</sup>*

54. Other examples of regional issues prioritized by NGO delegates for specific regions (though of importance to all communities and civil society) include: harm reduction and opioid substitution therapy for people who use drugs (e.g. a priority for the eastern Europe and central Asia region); HIV prevention for gay, bisexual and other men who have sex with men (e.g. a priority for the Middle East and North Africa region); and SRHR for adolescent girls and young women (e.g. a priority for the eastern and southern Africa region).
55. Importantly, the NGO Delegation’s relationship to regional issues is two-way. Members consult with their constituents to bring regional issues to the global stage of PCB meetings. Members also convey global discussions back to constituents, to inform regional- and country-level advocacy and policy-making. Meanwhile, attention to regional issues at Board meetings is augmented through ongoing collaboration between the NGO Delegation, Member States, UNAIDS Regional Support Teams/Country Offices, and regional and national networks of communities and civil society, including people living with HIV and key and vulnerable populations. In many instances, the Delegation has worked with such stakeholders to jointly identify and highlight emerging or urgent issues at the regional level, which are then brought to the fore in UNAIDS mechanisms.

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<sup>33</sup> Agenda Item 1.3: Outcome(s) of the Thematic Segment, 24th PCB Meeting, 2009.

<sup>34</sup> Agenda Item 1.4: Report of the NGO Representative, 43rd PCB Meeting, 2018.

#### Key contribution 4: Supporting the PCB to connect the response to HIV to wider issues and processes

56. The NGO Delegation has played a key role in moving the narrative and global response to HIV forward, by questioning “business as usual” approaches and strategizing around next steps. In some cases, changes have been necessary to react to challenging and emerging developments, such as reduced financing for HIV, the introduction of donor policies on sustainability and transition, and the COVID-19 pandemic. In other cases, changes have reflected advances in global frameworks, notably the introduction of the Sustainable Development Goals (SDGs).

*“The Delegation’s role is to protect the relevance of HIV—by keeping its strong position within the changing world, whether of the SDGs or COVID. The work is about keeping communities, HIV and UNAIDS relevant.”*

Sasha Volgina, NGO Delegate  
for Europe 2015-16

*“The NGO Delegation is always ahead of the game. They ensure that—whatever the changes—HIV does not fall off the agenda. They make timely and strategic interventions in order to ensure a consistent focus on the need to empower women and girls, people living with HIV and key populations.”*

Nazneen Damji, UN Women

57. Over the past 25 years, the NGO Delegation has supported the PCB and UNAIDS to conceptualize different **frameworks for the global response** to HIV. For example, at the 15th, 16th and 31st PCB meetings, it emphasized the importance of communities and civil society involvement in the development and implementation of universal access to HIV prevention, care, support and treatment; the “Three Ones”; and the UNAIDS Strategic Investment Framework.

58. The NGO Delegation has promoted the UN General Assembly High-Level Meetings on AIDS and resulting Political Declarations (in 2001, 2006, 2011 and 2016), which have served to guide and monitor the global response. In doing so, the Delegation has sought to connect its PCB efforts with wider actions on HIV. It has often collaborated with civil society leaders and NGO Delegations to other global institutions (such as the Global Fund and UNITAID) to ensure that the UN’s declarations address the priorities of communities and civil society.

59. In some cases, the Delegation has experienced disappointment. For example, while the 2011 Political Declaration on HIV and AIDS saw the introduction of language on some key populations, it neglected to specify transgender people. But there also have been successes. For example, the NGO Delegation played an essential role in pushing for a fully inclusive 2016 High-Level Meeting on HIV, despite the reluctance of some stakeholders. The Delegation’s intention was to keep HIV on the political agenda during the development of the SDGs. The 33rd PCB meeting passed a Decision Point on a proposal initiated by the NGO Delegation to invite the UN General Assembly to convene a High-Level Meeting.<sup>35</sup> The resulting Political Declaration set out the Fast-Track agenda for the next era of the response to HIV, including the 90–90–90 treatment targets.<sup>36</sup> It also cited transgender people as a key population.

60. The NGO Delegation took other steps, in the lead-up to 2015 and afterwards, to support

<sup>35</sup> Agenda Item 3: Update on the AIDS response in the post-2015 development agenda, 33rd PCB Meeting, 2013.

<sup>36</sup> Political Declaration on HIV and AIDS: On the Fast-Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030, United Nations General Assembly, June 2016.

the PCB's positioning of HIV within the 2030 Agenda.<sup>37</sup> For example, at the 32nd PCB meeting in 2013, the Delegation advocated for Decision Points requiring that post-2015 action should be evidence-based and should build on the lessons of the response to HIV.<sup>38</sup> Currently, the NGO Delegation joins fellow civil society leaders and other NGO Delegations in processes related to the High-Level Political Forums that serve to monitor progress and identify necessary actions on the Sustainable Development Agenda.

61. In recent years, the NGO Delegation has supported the PCB to "take HIV out of isolation", including exploring its positioning in relation to Universal Health Coverage (target 3.8 of SDG 3). For example, the Delegation helped organize a thematic session on the subject at the 44th PCB meeting in 2019 and secured people living with HIV as key speakers. At the 45th PCB meeting, the Delegation presented an NGO report titled *If it is to be truly universal: why Universal Health Coverage will not succeed without people living with HIV and other key populations, women and young people*. That report highlighted the contributions of those communities to HIV responses—for example reaching the most marginalized communities and addressing the wider socioeconomic determinants of health—which can be applied, replicated or scaled-up within Universal Health Coverage. The NGO Report led to important Decision Points, including:

*"4.6. Calls on the UNAIDS Joint Programme to continue supporting Member States in ensuring all the elements of comprehensive HIV programming, as set out in the UNAIDS Strategy (2016-2021), remain or become available and accessible to people living with HIV and other key populations, women and young people under Universal Health Coverage frameworks and policies; and*  
*4.7. Calls on Member States to contribute to the attainment of the Agenda 2030 for Sustainable Development commitment to leave no one behind and placing people living with HIV and other key populations, women and young people as critical partners and stakeholders in Universal Health Coverage design and implementation, and relevant policies and programmes, in order to promote approaches that are accountable, people-centred and community-led."*<sup>39</sup>

62. In 2020, the NGO Delegation has supported UNAIDS' response to COVID-19. For example, at the 46th PCB meeting, the Delegation conveyed the devastating impact of the pandemic on HIV interventions managed by and for communities and civil society, including service disruptions; reduced access to drugs; increased human rights abuses, marginalization and stigma and discrimination; and the re-allocation of financial and human resources.<sup>40</sup>
63. The NGO Delegation also urged that the lessons and models from action on HIV—including by and for communities and civil society—should be used in COVID-19 responses. An intervention by an NGO Delegate concluded that:

*"Without continued vigilance, resourcing, effort, and focus, the rates of new HIV infections and AIDS related deaths can escalate. This is a critical juncture that reminds us that we cannot lose ground and momentum. It remains vital to ensure that communities are at the centre, to promote rights-based approaches, and to address the structural and regulatory determinants of health to ensure responses to HIV are*

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<sup>37</sup> Agenda item 2: Update on the AIDS Response in the Post-2015 Development Agenda, 35th PCB Meeting, 2014.

<sup>38</sup> Agenda item 3: AIDS Response in the Post-2015 Development Agenda, 32nd PCB Meeting, 2013.

<sup>39</sup> Agenda Item 1.4: Report by the NGO Representative, 45th PCB Meeting, 2019.

<sup>40</sup> The PCB NGO Delegation's Communiqué Virtual 46th Programme Coordinating Board Meeting: June 23–25 2020, NGO Delegation to the UNAIDS PCB, June 2020.

*strengthened and not lost in responses to COVID-19. We remain vigilant and hopeful that Winnie [Byanyima] will lead the UNAIDS we need to meet ambitious HIV targets in this challenging environment ... We wish to take this opportunity to urge Member States to continue their support for UNAIDS and for Member States and the Joint Programme to work with us to ensure that the response to COVID-19 is not to the detriment of the HIV response, we must not leave HIV behind.”*

## Key contribution 5: Contributing to the effectiveness, efficiency and accountability of UNAIDS governance

64. The NGO Delegation has not only made an important contribution to the substance of PCB meetings, it has been integral to the **processes of UNAIDS governance** and strategy development. The Delegation has acted as an engaged and hard-working member of the PCB that is willing to push boundaries in the interest of democracy, good governance and accountability.

*“Over the years, the Delegation has used its opportunity to work with Member States, including from the Africa region, to build trust and understanding, such as about the needs of key populations. The response in our region would not have come so far without such work.”*

Felicita Hikuam, NGO Delegate for Africa  
2010–2012

65. The NGO Delegation has been actively involved in the structures of the PCB, with representatives actively serving as members of the **PCB Bureau**. That body is responsible for coordinating the Board’s work for the year,

*“As Member States and as a governance body, we want to do the right thing. The NGO Delegation is key in providing us with a sense of urgency and reminding us of the human side of the epidemic. They serve as a reality check – in terms of the consequences of the Board’s decisions for the lives of real people.”*

Anne Hassberger, Switzerland Permanent  
Mission to the United Nations in Geneva

including by developing meeting agendas, coordinating meeting papers, planning thematic sessions, analysing significant PCB issues (e.g. procedures), monitoring key PCB processes (e.g. evaluations) and tracking the work of Task Teams and Advisory Committees.<sup>41</sup> The NGO Delegation has been a key contributor to this significant body of work, ensuring that relevant decisions are informed by the needs and priorities of communities and civil society.

66. The Delegation has brought its principles to bear on the logistical decisions of the PCB. For example, at the 23rd PCB meeting, it helped to secure a decision that the selection of future countries to host non-Geneva PCB meetings should include “no HIV-related travel restrictions” in the criteria.

67. An area of major involvement by the NGO Delegation has been the UNAIDS UBRAF, the instrument that translates the UNAIDS Strategy into organizational, funded activities and responsibilities. For example, the Delegation has advocated (at the 23rd PCB meeting) that the Framework should address crosscutting issues such as human rights and gender equality.<sup>42</sup> At the 28th meeting of the PCB, the Delegation advocated for UNAIDS to provide more explicit reporting on resourcing and engagement of civil

<sup>41</sup> PCB Bureau Documents, UNAIDS, <https://www.unaids.org/en/whoweare/governance>

<sup>42</sup> Agenda item 2: The Unified Budget and Workplan: Monitoring Implementation and Planning for the Future, 23rd PCB Meeting, 2008.

society in the Framework.<sup>43</sup> At the 32nd PCB meeting, it urged that further refinement and rigour be added to the Framework's indicators in order to better measure the meaningful involvement of communities and civil society.<sup>44</sup>

68. More recently, at the 44th PCB meeting, the NGO Delegation provided input into UBRAF discussions that called for greater transparency in the Framework in documenting funding for civil society and for closer attention to disparities between the acceptance and implementation of policy indicators. The input also encouraged country-level programmes to focus on human rights approaches and harm reduction.<sup>45</sup>
69. Over the years, the NGO Delegation has also contributed to the development, implementation and monitoring of a series of UNAIDS reviews and strategies. For example, for the Second Independent Evaluation (discussed at the 21st PCB meeting), the Delegation was instrumental in ensuring that evaluation's remit included the Joint Programme's relationship with civil society and work on gender equity, human rights and GIPA.<sup>46</sup> Currently, the NGO Delegation is providing strategic inputs into the development of the UNAIDS Strategy for beyond 2021. At the 46th PCB meeting in June 2020, a representative of the Delegation urged UNAIDS not to neglect the "uncounted" (key and vulnerable populations, such as people who use drugs, transgender people and sex workers) in the development of a bold Strategy that will ensure that such communities still count in the response to HIV.<sup>47</sup>
70. The NGO Delegation has supported the process of nomination and selection of UNAIDS Executive Directors. For example, at the 22nd PCB meeting in 2008 and the 44th PCB meeting in 2019, the NGO Delegation successfully advocated for the inclusion of communities and civil society representatives on the Search Committee.
71. The NGO Delegation has "stepped up" by engaging in the most challenging aspects of UNAIDS governance. For example, two representatives participated in the PCB Working Group established following the report of the Independent Expert Panel in 2018. The Working Group, addressed issues of sexual harassment and abuse within UNAIDS. At the 42nd meeting of the PCB,<sup>48</sup> the Delegation took a robust position on this issue, including by demanding a comprehensive approach across the entire UNAIDS (including programme design, human resources, finance, training and evaluation) and at all levels (country, regional and global). The Delegation demanded a "zero tolerance" approach and called for political and financial commitments, emphasizing the need to tackle exploitation and abuses of power, the same issues that drive HIV epidemics.
72. The Delegation has also shown strong determination to use the PCB's mechanisms and procedures to pursue issues until an acceptable result is achieved. For example, at the 22nd and 23rd PCB meetings, the Delegation persistently asked for updates on the status of a policy on sex work, which UNAIDS had promise but not yet delivered.

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<sup>43</sup> Agenda Item 6: Unified Budget, Results and Accountability Framework 2012–2015, 28th PCB Meeting, 2011.

<sup>44</sup> Agenda item 4: UNAIDS 2012–2015 Unified Budget, Results and Accountability Framework, 32nd PCB Meeting, 2013.

<sup>45</sup> Agenda Item 7.1: Performance Reporting, 44th PCB Meeting, 2019.

<sup>46</sup> Agenda Item 2: Independent Evaluation of UNAIDS, 21st PCB Meeting, 2007.

<sup>47</sup> The PCB NGO Delegation's Communiqué Virtual 46th Programme Coordinating Board Meeting 23–25 June 2020, NGO Delegation to the UNAIDS PCB, June 2020.

<sup>48</sup> Agenda Item 2: Update on the Independent Expert Panel (the Panel) on Prevention of and Response to Harassment, Including Sexual Harassment, Bullying and Abuse of Power at UNAIDS Secretariat, 42nd PCB Meeting, 2018.

73. The NGO Delegation has pushed the PCB to identify and maintain key principles. For example, it played a key role in the introduction, at the 19th PCB meeting, of the Board's "chapeau": a set of guiding principles that apply to all aspects of its work. Those principles include "based on human rights and gender equality" and "based on the meaningful and measurable involvement of civil society, especially people living with HIV and populations most at risk of HIV infection". At the 24th Board meeting, the Delegation successfully advocated for the addition of "based on the principle of non-discrimination".
74. The Delegation has not succeeded in all areas of advocacy. For example, on a number of occasions, it has unsuccessfully sought full voting rights, alongside other members of the PCB and in line with the good practice operated by the Boards of other multilateral global health mechanisms, such as the Global Fund.<sup>49</sup> The Delegation is cognizant of legal guidance that granting voting rights to non-Member States would require a fundamental change to the UN Charter. However, such rights remain an important issue of principle. This is especially the case after a recent PCB meeting (where, for the first time at a Board meeting, voting was used as the decision-making process) and in a context where, potentially, more PCB meetings may be held "virtually" (a format which might lead to the more frequent use of voting).
75. The Delegation has taken strength from the fact that the majority of PCB members stand in support of communities. Nonetheless, the NGO Delegation has even faced challenges to its participation in UNAIDS' governance, including via the calls from some Member States for a review of the ECOSOC resolutions (1995/223 and 1995/2) which granted the Delegation seats on the Board. Such time after time, it has frequently underscored the democratic right of people most affected by HIV to have a voice in the decisions which, ultimately, affect their lives.
76. The NGO Delegation has also faced some challenges in engaging and mobilizing its own constituencies in relation to the governance of UNAIDS. This reflects the fact that communities and civil society actors may not see the connection between UNAIDS' global deliberations and their own work in communities or national policy-making. It also reflects that many organizations lack the capacity and resources to engage in advocacy, in particular at the global level. The NGO Delegation has sought to respond to such challenges. It has produced user-friendly communication materials (including communiqués which articulate how the results of PCB meetings "translate" to communities and countries); conducted participatory consultation processes; connected constituents to capacity building opportunities; and, where possible, brought country-level stakeholders directly into PCB deliberations, for example during thematic sessions.
77. The NGO Delegation has shown that it is willing to be transparent and accountable, and to learn from its own strengths and weaknesses as a stakeholder in UNAIDS governance. As noted, comprehensive and independent evaluations of the Delegation were conducted in 2007 and 2012, with the results presented to the 20th and 31st PCB meetings, respectively. The recommendations from those evaluations contributed to ongoing processes of self-improvement by the NGO Delegation, in terms of continuously enhancing its procedures, principles and working culture, for example in relation to the recruitment of, and terms of reference for, new members.

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<sup>49</sup> Agenda Item 3.2: Results of the Review of NGO/Civil Society participation in the Programme Coordinating Board, 20th PCB Meeting, UNAIDS, June 2007.

## Key contribution 6: Influencing the governance of and partnerships with other global health institutions

78. The inclusion and work of an NGO Delegation in the PCB has influenced the Board of UNAIDS, as well as the governance, decision-making and partnership structures of other global health institutions and initiatives. The **Global Fund** is an example. The UNAIDS PCB is widely recognized as providing inspiration for the model of the Global Fund Board, which includes communities and delegations from developed country and developing country NGO delegations. Through discussions (such as agenda items at the 11th and 13th PCB meetings, and a thematic session at the 23rd meeting), the NGO Delegation helped establish the principle that, for both UNAIDS and the Global Fund, communities and civil society involvement must go beyond a “seat at the table”. It should be about a commitment to the full and meaningful engagement of the sector, including of communities that are most affected.
79. While it is difficult to quantify the exact contribution, many stakeholders cite the NGO Delegation to the PCB as an important precedent for other global health governance structures and initiatives. Examples include the Boards of UNITAID and GAVI. Further examples include the civil society engagement structures related to the UHC 2030 partnership, such as the Civil Society Engagement Mechanism for Universal Health Care 2030<sup>50</sup> and the Global Action Plan for Healthy Lives and Well Being for All.<sup>51</sup> The latter structure brings together 12 multilateral health, development and humanitarian agencies to better support countries to achieve progress on the health-related SDGs, and it includes an accelerator on community/civil society engagement. In many cases, the NGO Delegation has now built collegial relationships with such bodies, working within the rapidly-changing global health architecture to develop new forms of multilateral responses, while ensuring the involvement of key population and vulnerable populations/civil society and attention to their priority issues.

*“The NGO Delegation to the UNAIDS PCB has paved the way for community engagement in other types of global health bodies. It pioneered a good practice that has now become more expected and widespread. It has shown how such meaningful engagement is very possible and how it brings solid benefits to the quality and results of a Board’s work.”*

Laurel Sprague, UNAIDS Secretariat

## Conclusions

80. As described in this NGO Report 2020, the NGO Delegation has brought 25 years of engagement, evidence and impact to the UNAIDS PCB. The Board can be proud of that history.
81. The NGO Delegation has made unique and significant contributions to UNAIDS and its governance. It has brought the face of HIV to the PCB and persistently advocated for the priority issues of communities and civil society. It has brought before the PCB evidence, prominence and passion on neglected and contentious issues. It has brought a regional perspective to the PCB, highlighting communities and civil society issues from diverse contexts. The Delegation has also supported the PCB to evolve the response to HIV and connect it to wider issues and processes. It has contributed to the effectiveness, efficiency and accountability of UNAIDS governance. And it has influenced the governance of other global health institutions and fostered partnerships

<sup>50</sup> <https://csemonline.net/>

<sup>51</sup> <https://www.who.int/initiatives/sdg3-global-action-plan/about>



with them.

82. The NGO Delegation and, in turn, the PCB, has benefitted enormously from its members, who have brought immense experience, insight and energy. In turn, such Delegates and their organizations have secured reciprocal benefits from their involvement, including through opportunities to articulate their constituents' priorities on a global stage, have access to key decision-makers and build their advocacy capacity.
83. The NGO Delegation's 25 years of engagement has brought multiple, concrete results. Many discussions would not have been held and many Decision Points would not have materialized (in the same way or perhaps even at all) without the Delegation's resolve and work.
84. The NGO Delegation has brought communities and civil society issues such as human rights, gender equity and meaningful engagement to the heart of the PCB's deliberations. That work has also extended beyond the issues directly affecting constituents and has helped ensure that UNAIDS is a well-governed, principle-based and accountable Joint Programme within the UN.
85. It is critical to note that the stability and quality of the NGO Delegation's work has been significantly enhanced by its Communication and Consultation Facility. As described in the introduction to this Report, this entity has multiple important roles and responsibilities, including providing high-quality organizational systems and processes, as well as strong communications and institutional memory. It also facilitates essential opportunities for the Delegation, for example to implement reviews and strategic planning, and to conduct retreats (an essential opportunity for Delegates to meet and strategize in-person beyond the twice-yearly PCB meetings). These invaluable capacities and assets enable the members of the Delegation (who are situated across the world and who work in a voluntary capacity) to function professionally and efficiently, with a united voice.
86. In 2020, the environment for the response to HIV is more complex than ever. There are ongoing challenges, such as reduced funding, punitive legal environments and shrinking space for civil society. They are compounded by evolving global crises (such as COVID-19) and are influenced by vital global movements (such as on Black Lives Matter and climate change). This highlights that the work of the NGO Delegation is far from done. As attention to HIV waivers, the voices of communities and civil society are needed more than ever—to keep HIV on the agenda, hold decision-makers to account and advocate for the needs of real people and real communities.
87. Going forward, as UNAIDS develops its next Strategy and reasserts its position in the rapidly evolving global health architecture, the NGO Delegation to the UNAIDS PCB remains essential. It has more than proven its worth, value and impact. It must be protected, resourced and enabled to flourish in the future.



## The future of the NGO Delegation to the UNAIDS PCB, as identified by e-survey respondents

The e-survey for the NGO Report 2020 asked respondents to identify actions to improve and sustain the work of the NGO Delegation to the PCB.<sup>52</sup> The following are examples of responses.<sup>53</sup>

*“It is imperative for the NGO Delegation to stay true to their mission and core business ... that is representing the interests, needs and demands of the communities they are representing on the PCB. The actions taken might vary with the actual goals, but maintaining our unique voice must stay in focus.”*

Ferenc Bagyinszky, respondent from Europe

*“As other global health institutions play a greater role in the HIV and related global pandemic/epidemic responses, and civic space shrinks globally, the PCB NGO Delegation may wish to use the next phase of its work to lead a movement for similar community representation in the governance structure of global health institutions. The next phase of global health response will require stronger and more 'institutionalized' community voice and representation.”*

Anonymous, respondent from North America

*“The NGO Delegation exists as an important part of the ecosystem of UNAIDS. Akin to climate change, the global political climate that poses a threat towards the existence of and the space of the NGO Delegation as part of the PCB will only result towards the failure of UNAIDS itself. Thus, 25 years later, and now more than ever, the NGO Delegation space needs to be preserved and protected.”*

Jeff Acaba, respondent from Asia and the Pacific

## Recommendations

88. Based on the findings and conclusions of the NGO Report 2020, it is recommended that, to support and sustain the work of the NGO Delegation to the UNAIDS PCB, relevant stakeholders should:
- Within future strategies and modus operandi, reconfirm their commitment to the formal involvement of communities and civil society in the PCB, as set out in the founding ECOSOC decisions for UNAIDS (1995/223 and 1995/2).
  - Ensure the ongoing and full resourcing of the NGO Delegation's Communication and Consultation Facility, as an essential mechanism to ensure the high quality and efficient work of the Delegation.
  - Strengthen and implement measures, including indicators and reporting mechanisms, to measure, monitor and report on the scale and impact of people communities and civil society engagement in the UNAIDS PCB.
  - Produce a succinct resource documenting the key processes ("how to"), lessons and results of 25 years of the NGO Delegation to the UNAIDS PCB to serve as a tool to inform and mobilize other UN and global health institutions to engage communities and civil society as a mainstay of their governance structures.

<sup>52</sup> E-survey question 8: In the future, what actions would you recommend to improve and sustain the work of the NGO Delegation to the Programme Coordinating Board? [Please comment]. Total of 45 respondents.

<sup>53</sup> Permission was sought from the respondents to the survey for their responses to be published in the NGO Report, as per e-survey question 10: "Do you consent to be quoted in the 2020 NGO Report? [Please select one option]".

## Proposed Decision Points for the 47th meeting of the PCB

89. Based on the findings and conclusions of the NGO Report 2020, the following Decision Points are recommended to the 47th PCB meeting:
90. *Recalling* previous decision points (from the 2012 meeting of the PCB when the evaluation report was submitted, plus other recent and relevant decision points relating to civil society engagement)<sup>54</sup>;
91. *Recognizing* that meaningful involvement of communities and civil society is central and a prerequisite for an effective HIV response on the path to end AIDS<sup>55</sup>;
92. *Recognizing* the value, contribution, effectiveness and impact of the NGO Delegation at the PCB as best practice, particularly in bringing to light urgent concerns faced by people living with HIV, key populations, women, young people and migrants, for immediate attention and action;
93. *Takes note of* the report;
94. *Calls on* Member States and the Joint Programme to affirm the NGO Delegation as an integral component of the governance of the PCB and to ensure an enabling environment for its continued meaningful engagement, representation of authentic community voices and perspectives, and outreach to its community and civil society constituencies;
95. *Urges* Member States and the Joint Programme to ensure full and meaningful participation of civil society representation at the PCB through the NGO Delegation, including a fully-funded Communication and Consultation Facility;
96. *Requests* the Joint Programme to ensure that strategies for community and civil society engagement are enshrined in the next Global AIDS Strategy;
97. *Builds on* lessons learned from community and civil society engagement, particularly key populations and people living with HIV in the global, regional, national, and local HIV responses, including, but not limited to:
  - a. the importance of bringing embodied knowledge of HIV and lived experiences to decision-making processes;
  - b. the knowledge about the needs of people living with and affected by HIV, and what works and why other interventions do not work at country level;
  - c. the efficiency in planning and utilization of resources in HIV programming;
  - d. the effectiveness of community-led HIV programming and service delivery;

[Annexes follow]

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<sup>54</sup> Decision Points 4.2, 4.5, 7.4, 7.5, 8.2 and 8.3 of the 45<sup>th</sup> PCB Meeting; Decision Points 7.5 and 10.3 of the 43<sup>rd</sup> PCB Meeting; Decision Points 4.3, 4.4, 7.2 and 7.3 of the 41<sup>st</sup> PCB Meeting.

<sup>55</sup> Paragraphs 21 and 29 of the United Nations Political Declaration on Ending AIDS.

## Annex 1: List of interviewees

	<b>Name</b>	<b>Organization</b>
1.	Bai Bagasao	(Former) NGO Delegate Asia-Pacific
2.	John Rock	(Former) NGO Delegate Asia-Pacific
3.	Mabel Bianco	(Former) NGO Delegate Latin America and the Caribbean
4.	Malu Marin	(Current) Communications and Coordination Facility for the NGO Delegation
5.	Sasha Volgina	Global Network of People Living with HIV (GNP+) (Former) NGO Delegate Europe
6.	Nadia Rafif	MPact Global Action for Gay Men's Health and Rights (MPact) (Former) NGO Delegate Africa
7.	Erika Castellanos	GATE Trans, Gender Diverse and Intersex Advocacy in Action (Former) NGO Delegate Latin America and the Caribbean
8.	Felicita Hikaum	AIDS and Rights Alliance for Southern Africa (ARASA) (former) NGO Delegate Africa
9.	Mat Southwell	Coact Partners and International Drug Policy Consortium (former) NGO Delegate Europe
10.	Ruth Morgan-Thomas	Global Network of Sex Work Projects (NSWP)
11.	Anne Hassberger	Switzerland Permanent Mission to the United Nations in Geneva
12.	Laurel Sprague	UNAIDS Secretariat (former) NGO Delegate North America
13.	Morten Ussing Samia Lounnas	UNAIDS Secretariat
14.	Helen Frary	UNAIDS Secretariat
15.	Ludo Bok	United Nations Development Programme (UNDP)
16.	Nazneen Damji	UN Women
17.	Andy Seale	World Health Organization (WHO)

## Annex 2: Profile of survey respondents

The e-survey conducted for the NGO Report 2020 received a total of 50 responses. The following summarizes the profile of the respondents:

### 1. What is your name?

Total respondents = 42

### 2. What region are you based in? [Please select one option]

Total respondents = 49

a. Africa	11
b. Asia-Pacific	11
c. Europe	7
d. Latin America and the Caribbean	10
e. North America	10

### 3. What type of organization do you work with or represent? [Please select one option]

Total respondents = 49

a. Community organization or network (such as of people living with HIV or key populations)	18
b. National civil society organization or network	11
c. Regional civil society organization or network	6
d. International civil society organization or network	10
e. Other (please specify)	4

### 4. How have you been involved with the NGO Delegation to the UNAIDS Programme Coordinating Board? [Please select as many options as you like]

Total respondents = 50

a. I have been a member of the NGO Delegation	15
b. I have been an observer NGO at a Programme Coordinating Board meeting	15
c. I have contributed to NGO Delegation research and reports	19
d. I have received the NGO Delegation's communiqués and information materials	22
e. I have been involved in an NGO Delegation civil society advisory group, task force or ad hoc working groups	21
f. I have not been involved with the NGO Delegation	7
g. Other: Please specify	4

### Annex 3: List of past and current members of the NGO Delegation

Since its creation in 1995, the NGO Delegation has involved the following total numbers of organizations and people.

Region	Organizations	People
Africa	21	24
Asia Pacific	16	23
Europe	17	22
Latin America and the Caribbean	15	20
North America	16	19
<b>Total</b>	<b>85</b>	<b>108</b>

The following includes all past and current members of the NGO Delegation.

Africa	
<ul style="list-style-type: none"> <li>• <b>SRHR Africa Trust (SAT)</b> (2019-present) - Jonathan Gunthorp</li> <li>• <b>Positive Young Women Voices (PYWV)</b> (2019-present) - <b>Lucy Wanjiku</b></li> <li>• <b>Uganda Youth Coalition on Adolescent Sexual Reproductive Health Rights and HIV (CYSRA-Uganda)</b> (2016-2018) - Musah Lumumba El-Nasoor</li> <li>• <b>African Men for Sexual Health and Rights (AMShEr)</b> (2017-2018) - Kene Esom (2017), Humphrey Nondo (2018)</li> <li>• <b>Widows Fountain of Life</b> (2015-2016) - Angeline Chiwetani</li> <li>• <b>African Community Advisory Board (AFROCAB)</b> (2014-2015) - Kenly Sikwese (2014), Obatunde Oladapo (2015)</li> <li>• <b>African Men for Sexual Health and Rights (AMShEr)</b> (2012-2013) - Joel Nana</li> <li>• <b>Association de Lutte Contre le Sida (ALCS)</b> (2011-2013) - Nadia Rafif</li> <li>• <b>African Sex Workers Alliance</b> (2012) - Nomonde Mhlahi Meji</li> <li>• <b>AIDS and Rights Alliance for Southern Africa (ARASA)</b> (2010-2011) – Felicity Hikaum</li> <li>• <b>The AIDS Support Organization (TASO)</b> (2009-2010) - Lydia Mungherera</li> </ul>	<ul style="list-style-type: none"> <li>• <b>The Southern African Network of AIDS Service Organizations (SANASO)</b> (2008-2009) - Mercy Machiya (2008), Amelia Ranotsi (2009)</li> <li>• <b>Cameroon Network of Associations of PLWHA (RECAP)</b> (2007-2008) - James Clovis Kayo</li> <li>• <b>Rwanda Women's Network</b> (2006-2007) - Mary Vuningoma Balikungeri</li> <li>• <b>Kenya Network of Women with AIDS</b> (2005-2006) - Asunta Wagura</li> <li>• <b>Journalists Against AIDS</b> (2004-2005) - Omololu Falobi</li> <li>• <b>Mozambique Red Cross Society</b> (2002-2004) - Fernanda Teixeira</li> <li>• <b>The Ghana HIV/AIDS Network</b> (2001-2003) - Alice Lamptey</li> <li>• <b>Nigerian Network against AIDS</b> (1999-2000) - Jiuka Jegede</li> <li>• <b>Women Fighting AIDS in Kenya</b> (1998-1999) - Dorothy Odhiambo</li> <li>• <b>Churches Medical Association of Zambia (CMAZ)</b> (1995-1998) - Mazuwa Banda Zambia</li> </ul>
Asia-Pacific	
<ul style="list-style-type: none"> <li>• <b>Rumah Cemara</b> (2018-present) - <b>Aditia Taslim Lim</b></li> <li>• <b>Scarlet Alliance</b> (2019-present) - Jules Kim</li> <li>• <b>India HIV/AIDS Alliance</b> (2016 -2018) - Simran Shaikh (2016), Sonal Mehta (2017-2018)</li> <li>• <b>Youth Lead</b> (2015 - 2017) - Jeffry Acaba</li> <li>• <b>Asia Pacific Network of Sex Workers (APNSW)</b> (2014 - 2015) - Khartini Slamah (2014), Rani Ravudi (2015), Kay Thi Win (2015)</li> <li>• <b>International Treatment Preparedness Coalition (ITPC)</b> (2012-2014) - Attapon Ed Ngoksin (2012), John Rock (2013-2014)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>AntiAIDS Association</b> (2008-2009) - Gulnara Kurmanova</li> <li>• <b>Gram Bharati Samiti (GBS)</b> (2006-2007) - Bhavani Shanker Kusum India</li> <li>• <b>Asia Pacific Network of People Living with HIV/AIDS</b> (2005-2007) - Rachel Ong</li> <li>• <b>AMAL Human Development</b> (2002, 2004-2005) - Syed Imran Rizvi</li> <li>• <b>Hong Kong AIDS Foundation</b> (2000-2003) - O.C. Lin</li> <li>• <b>Equal Ground</b> (2001) - Charles Nigel De Silva</li> <li>• <b>HIV/AIDS Development Network Australia (HIDNA)</b> (1997-1999) - Bill O'Loughlin</li> </ul>

<ul style="list-style-type: none"> <li>• <b>Asia Pacific Network of People Living with HIV/AIDS</b> (2011-2013) - Abdullah Denovan (2011), Jane Bruning (2011-2013)</li> <li>• <b>Asia Pacific Network of Sex Workers (APNSW)</b> (2010-2011) - Rathi Ramanathan</li> <li>• <b>Asia Pacific Coalition of Regional Networks on HIV/AIDS</b> (2008-2010) - Vincent Crisostomo</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Malaysian AIDS Council</b> (1997) - Marina Mahathir</li> <li>• <b>Kabalikat ng Pamilyang Pilipino Foundation Inc. (HIV/AIDS Network Philippines)</b> (1995-1996) - Teresita Bagasao</li> </ul>
<b>Europe</b>	
<ul style="list-style-type: none"> <li>• <b>Eurasian Key Populations Health Network</b> (2020-present) – Karen Badalyan</li> <li>• <b>HIV Vereniging</b> (2019-present) - <b>Alexander Pastoors</b></li> <li>• <b>All-Ukrainian Network of People Living with HIV</b> (2017-2019) - Vitali Tkachuk (2017), Valeriia Rachynska (2018-2019)</li> <li>• <b>AIDS Action Europe (AAE)</b> (2016-2018) - Ferenc Bagyinsky</li> <li>• <b>East Europe &amp; Central Asia Union of People Living with HIV (ECUO)</b> (2015-2016) - Sasha Volgina</li> <li>• <b>European AIDS Treatment Group</b> (2013–2015) - Ninoslav Mladenovic (2013); Bryan Teixeira (2013 - 2015)</li> <li>• <b>Eurasian Harm Reduction Network</b> (2013-2014) - Dasha Ocheret</li> <li>• <b>International AIDS Vaccine Initiative</b> (2010-2012) - Rhon Reynolds (2010-2011), Laura Kirkegaard (2012)</li> <li>• <b>International Network of People Who Use Drugs (INPUD)</b> (2010-2012) - Matthew Southwell</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Evangelischer Entwicklungsdienst (EED)/ Church Development Service</b> (2008-2009) - Sonja Weinreich</li> <li>• <b>Russian Harm Reduction Network (RHRN)</b> (2007-2009) - Vitaly Zhumagaliev (2007-2009), Pavel Aksenov (2009)</li> <li>• <b>European Youth Network on Sexual and Reproductive Rights – YouAct</b> (2006-2007) - Paulo Vieira</li> <li>• <b>AIDS Infoshare</b> (2004-2006) - Alena Peryshkina</li> <li>• <b>International Community of Women Living with HIV/AIDS</b> (2004-2005) - Maria Jose Vazquez (2004-2005), Promise Mthembu (2005)</li> <li>• <b>ABRACO</b> (2000-2003) - Pedro Silverio Marques</li> <li>• <b>AIDES</b> (1995-1999) - Arnaud Marty-Lavauzelle</li> <li>• <b>CMC-Churches’ Action for Health, World Council of Churches</b> (1997) - Erlinda N. Senturias</li> </ul>
<b>Latin America and the Caribbean</b>	
<ul style="list-style-type: none"> <li>• <b>Nacional REDBOL</b> (2007-2009, 2020-present) - Gracia Violeta Ross Quiroga</li> <li>• <b>Jamaican Network of Seropositives</b> (2020-present) – Jumoke Patrick</li> <li>• <b>GESTOS - HIV+, Communication and Gender</b> (2012-2014, 2017-2019) - Alessandra Nilo</li> <li>• <b>Guyana Trans United</b> (2018-2019) - Millie Milton</li> <li>• <b>Collaborative Network for Persons Living with HIV (CNET +)</b> (2016-2017) - Erika Castellanos (2016), Martha Angelica Carrillo (2017)</li> <li>• <b>Somosgay</b> (2015-2016) - Simon Casal</li> <li>• <b>Caribbean Regional Network of People Living with HIV (CRN+)</b> (2014-2015) - Yolanda Simon (2014), Ainsley K. Reid (2015)</li> <li>• <b>Fundación para Estudio e Investigación de la Mujer (FEIM)</b> (1997, 2011-2013) - Mabel Bianco</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Corporación Kimirina;</b> (2010-2011) - Amira Herdoiza</li> <li>• <b>Caribbean Vulnerable Communities Coalition</b> (2009-2010) - Robert Carr (2009), Ian McKnight (2010)</li> <li>• <b>Red Latinoamericana de Reducao de Danos (RELARD)</b> (2006-2008) - Sandra Batista</li> <li>• <b>Network of Sex Work Projects (NSWP)</b> (2005-2006) - Gabriela Silva Leite</li> <li>• <b>Red Latinoamericana de Personas Viviendo con el VIH/SIDA (RED LA+)</b> (2002-2005) - Javier Luis Bellocq (2002-2003), Jacqueline Rocha-Cortes (2004), Luis Leiva (2005)</li> <li>• <b>Organizacion de Apoyo a una Sexualidad Integral frente al SIDA (OASIS)</b> (2000-2004) - Ruben Mayorga</li> <li>• <b>Centro de Estudios de la Sexualidad</b> (1995-1999) - Luis Gauthier</li> </ul>
<b>North America</b>	

<ul style="list-style-type: none"><li>• <b>Women's Health in Women's Hands CHC (WHIWH)</b> (2019-present) - Wangari Tharao</li><li>• <b>The United States People Living with HIV Caucus (the HIV Caucus)</b> (2019-present) - Andrew Spieldenner</li><li>• <b>Canadian Aboriginal AIDS Network (CAAN)</b> (2016-2018) - Trevor Stratton</li><li>• <b>Global Network of Black People Working in HIV</b> (2017-2018) - Marsha Martin</li><li>• <b>The Global Network of People Living with HIV, North America</b> (2014-2016) - Laurel Sprague</li><li>• <b>Housing Works Inc.</b> (2013-2015) - Charles King</li><li>• <b>International Community of Women with HIV/AIDS – North America</b> (2011-2013) - Ebony Johnson</li><li>• <b>Global Forum on MSM and HIV (MSMGF)</b> (2011-2012) - George Ayala</li><li>• <b>Ontario HIV Treatment Network</b> (2008-2010) - Evan Collins</li></ul>	<ul style="list-style-type: none"><li>• <b>International Planned Parenthood Federation - Western Hemisphere</b> (2009-2010) - Alexandra Garita (2009), Maria Antonieta Alcalde Castro (2009-2010)</li><li>• <b>Interagency Coalition on AIDS and Development (ICAD)</b> (2006-2008) - Michael O'Connor</li><li>• <b>International Women's Health Coalition</b> (2007-2008) - Zonibel Woods</li><li>• <b>Health Global Access Project (Health GAP)</b> (2004-2006) - T. Richard Corcoran</li><li>• <b>African Services Committee</b> (2004-2005) - Kim Nichols</li><li>• <b>Canadian Foundation for Drug Policy/IHRA</b> (1999-2003) - Diane Riley</li><li>• <b>Global Network of People Living with HIV/AIDS</b> (1997-2001) - Jairo Pedraza</li><li>• <b>International Community of Women Living with HIV/AIDS</b> (1995-1997) - Martina Clark (1995-1996), Cheryl Brown (1997)</li></ul>
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#### Annex 4: Topics of NGO reports

<b>1995</b>	1 <sup>st</sup> PCB 13-14 July	(No report)
	2 <sup>nd</sup> PCB 13-15 November	(No report)
<b>1996</b>	3 <sup>rd</sup> PCB 10-11 June	(No report)
<b>1997</b>	4 <sup>th</sup> PCB 7-9 April	Priority issues for the NGO Delegation
	5 <sup>th</sup> PCB 16-18 November	Priority issues for the NGO Delegation
<b>1998</b>	6 <sup>th</sup> PCB 25-27 May	Priority issues for the NGO Delegation
	7 <sup>th</sup> PCB 9-11 December	Priority issues for the NGO Delegation
<b>1999</b>	8 <sup>th</sup> PCB 28-29 June	Priority issues for the NGO Delegation
<b>2000</b>	9 <sup>th</sup> PCB 25-26 May	The greater involvement of people infected and affected by HIV/AIDS
	10 <sup>th</sup> PCB 14-15 December	Priority issues for the NGO Delegation
<b>2001</b>	11 <sup>th</sup> PCB 30 May - 1 June	Priority issues for the NGO Delegation
<b>2002</b>	12 <sup>th</sup> PCB 29-31 May	Priority issues for the NGO Delegation
	13 <sup>th</sup> PCB 11-12 December	(No report)
<b>2003</b>	14 <sup>th</sup> PCB 26-27 June	Priority issues for the NGO Delegation
<b>2004</b>	15 <sup>th</sup> PCB 23-24 June	Priority issues for the NGO Delegation
	16 <sup>th</sup> PCB 14-15 December	Priority issues for the NGO Delegation
<b>2005</b>	17 <sup>th</sup> PCB 27-29 June	Priority issues for the NGO Delegation
<b>2006</b>	18 <sup>th</sup> PCB 27-28 June	Priority issues for the NGO Delegation
	19 <sup>th</sup> PCB 6-8 December	(No report)
<b>2007</b>	20 <sup>th</sup> PCB 25-27 June	Priority issues for the NGO Delegation
	21 <sup>st</sup> PCB 17-18 December	(No report)
<b>2008</b>	22 <sup>nd</sup> PCB 23-25 April	(No report)
	23 <sup>rd</sup> PCB 15-17 December	(No report)
<b>2009</b>	24 <sup>th</sup> PCB 22-24 June	Barriers to universal access
	25 <sup>th</sup> PCB 8-10 December	(No report)
<b>2010</b>	26 <sup>th</sup> PCB 22-24 June	Stigma and discrimination as barriers to universal access
	27 <sup>th</sup> PCB 6-8 December	(No report)
<b>2011</b>	28 <sup>th</sup> PCB 21-23 June	(No report)
	29 <sup>th</sup> PCB 13-15 December	Legal issues and HIV responses
<b>2012</b>	30 <sup>th</sup> PCB 5-7 June	Impact of reduced funding for HIV on civil society
	31 <sup>st</sup> PCB 11-13 December	(No report)
<b>2013</b>	32 <sup>nd</sup> PCB 25-27 June	(No report)
	33 <sup>rd</sup> PCB 17-19 December	The equity deficit: unequal and unfair access to HIV treatment, care and support for key affected communities
<b>2014</b>	34 <sup>th</sup> PCB 1-3 July	(no report)
	35 <sup>th</sup> PCB 9-11 December	When 'rights' cause wrongs: addressing intellectual property barriers to ensure access to treatment for all people living with HIV
<b>2015</b>	36 <sup>th</sup> PCB 30 June – 2 July	(No report)
	37 <sup>th</sup> PCB 26-28 October	(No report)
<b>2016</b>	38 <sup>th</sup> PCB 28-30 June	Sexual and reproductive health and rights of people most affected by HIV: the right to development
	39 <sup>th</sup> PCB 6-8 December	An unlikely ending: ending AIDS by 2030 without sustainable funding for the community-led response
<b>2017</b>	40 <sup>th</sup> PCB 27-29 June	(No report)
	41 <sup>st</sup> PCB 12-14 December	The UNAIDS we need must leave no-one behind: getting to zero includes all of us (the 10-10-10)
<b>2018</b>	42 <sup>nd</sup> PCB 26-28 June	(no report)
	43 <sup>rd</sup> PCB 11-13 December	People on the move – key to ending AIDS
<b>2019</b>	44 <sup>th</sup> PCB 25-27 June	(No report)
	45 <sup>th</sup> PCB 10-12 December	If it is to be truly universal: why Universal Health Coverage will not succeed without people living with HIV and other key populations, women and young people
<b>2020</b>	46 <sup>th</sup> PCB 23-25 June	(No report)