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Asia-Pacific High-level Intergovernmental Meeting on the Assessment of Progress against Commitments in the Political Declaration on HIV/AIDS and the Millennium Development Goals

Bangkok, 6-8 February 2012 Item 6 of the provisional agenda Promotion of regional cooperation to accelerate the implementation of the internationally agreed commitments to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific

Accelerating regional implementation of the internationally agreed commitments to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific

Note by the secretariat

Summary

The present document proposes a framework to support Governments in the regional implementation of the Political Declaration on HIV and AIDS: Intensifying our Efforts to Eliminate HIV and AIDS, which was adopted by the Heads of State and Government and representatives of States and Governments at the high-level meeting on the comprehensive review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS, held at United Nations Headquarters from 8 to 10 June 2011. Section II of the document highlights the time-bound targets, as contained in the Declaration. Section III reviews the commitments in the Declaration to advance human rights to reduce stigma, discrimination and violence that are relevant to the implementation of ESCAP resolutions 66/10 of 19 May 2010 on a regional call for action to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific and 67/9 of 25 May 2011 on the Asia-Pacific regional review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS. The provisions of resolutions 66/10 and 67/9 are given in sections IV and V. The Meeting is invited to review and endorse the proposed regional framework, as contained in section VI, which focuses on a series of actions to support the implementation of the above-mentioned commitments with a view to achieving universal access to HIV prevention, treatment, care and support in Asia and the Pacific.

Contents

		Page
I.	Introduction	2
II.	The 2011 Political Declaration on HIV and AIDS: time-bound commitments	3
III.	Reducing stigma, discrimination and violence related to HIV	7
IV.	ESCAP resolution 66/10 on a regional call for action to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific	7
V.	ESCAP resolution 67/9 on the Asia-Pacific regional review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS	8
VI.	Regional framework to support the implementation of international a region-specific commitments	
VII.	Conclusion	12
Figure		
	Regional framework to support the implementation of international a region-specific commitments	

I. Introduction

- 1. To support the regional implementation of the internationally agreed commitments to achieve universal access to HIV prevention, treatment, care and support, as outlined in the recently adopted Political Declaration on HIV and AIDS: Intensifying our Efforts to Eliminate HIV and AIDS, a framework for future action is needed. The purpose of the present document is to outline a regional framework that can support Governments in accelerating and monitoring their national efforts towards universal access through regional cooperation, including the sharing of information, experiences and good practices related to the HIV and AIDS response.
- 2. As the Commission in its resolution 66/10 also underscored the need "to ground universal access in human rights and undertake measures to address stigma and discrimination, as well as policy and legal barriers to effective HIV responses, in particular with regard to key affected populations", the document also highlights the commitments in the Declaration to advance human rights to reduce stigma, discrimination and violence related to HIV, as well as the region-specific commitments contained in ESCAP resolutions 66/10 and 67/9.
- 3. Given that the Declaration requests the regional commissions, within their respective mandates and resources, "to support periodic, inclusive reviews of national efforts and progress made in their respective regions to combat HIV", the document focuses on the time-bound commitments in the Declaration, keeping in mind that full and effective

¹ See General Assembly resolution 65/277.

implementation of all the commitments in the Declaration will be required in order to halt and reverse the epidemic.

4. The proposals in the document are intended to add value to the effective measures already taken by Governments, civil society organizations, key affected communities, the United Nations system, other intergovernmental organizations and development cooperation partners, with particular focus on areas related to multisectoral cooperation, intergovernmental reviews and regional cooperation modalities in line with the mandate of ESCAP.

II. The 2011 Political Declaration on HIV and AIDS: timebound commitments

- 5. In the 2011 Political Declaration on HIV and AIDS, States Members of the United Nations agreed to 17 time-bound targets, in addition to far reaching goals in a range of areas, to intensify the global response to HIV and AIDS and promote continued political commitment and comprehensive responses at the community, local, national, regional and international levels to halt and reverse the HIV epidemic and mitigate its impact.
- 6. Member States also committed to putting in place "effective evidenced-based operational monitoring and evaluation and mutual accountability mechanisms between all stakeholders to support multisectoral national strategic plans for HIV and AIDS to fulfil the commitments in the present Declaration, with the active involvement of people living with, affected by and vulnerable to HIV, and other relevant civil society and private sector stakeholders."
- 7. To follow up and sustain progress, the Declaration requests the regional commissions, within their respective mandates and resources, "to support periodic, inclusive reviews of national efforts and progress made in their respective regions to combat HIV." The Declaration further requests the Secretary-General "to provide to the General Assembly an annual report on progress achieved in realizing the commitments made in the present Declaration" and "to report to the Assembly on progress in accordance with global reporting on the Millennium Development Goals at the 2013 review of the Goals and subsequent reviews."
- 8. The 17 time-bound targets in the Declaration, which will, inter alia, be reviewed as part of reporting on progress in meeting the commitments in the Declaration, are as follows:
 - (a) Leadership: uniting to end the HIV epidemic:
 - (i) Commit to redouble efforts to achieve, by 2015, universal access to HIV prevention, treatment, care and support as a critical step towards ending the global HIV epidemic, with a view to achieving Millennium Development Goal 6, in particular to halt and begin to reverse, by 2015, the spread of HIV (para. 51);
 - (ii) Commit to update and implement, by 2012, through inclusive, country-led and transparent processes, multisectoral national HIV and AIDS strategies and plans, including financing plans, which include time-bound goals to be reached in a targeted, equitable and sustained manner, to accelerate efforts to achieve universal access to

HIV prevention, treatment, care and support by 2015, and address unacceptably low prevention and treatment coverage (para. 54);

- (iii) Commit to increase national ownership of HIV and AIDS responses, while calling upon the United Nations system, donor countries, the Global Fund to Fight AIDS, Tuberculosis and Malaria, the business sector and international and regional organizations to support Member States in ensuring that nationally driven, credible, costed, evidence-based, inclusive and comprehensive national HIV and AIDS strategic plans are, by 2013, funded and implemented with transparency, accountability and effectiveness in line with national priorities (para. 55);
- (b) Prevention: expand coverage, diversify approaches and intensify efforts to end HIV:
 - (i) Commit to working towards reducing sexual transmission of HIV by 50 per cent by 2015 (para. 62);
 - (ii) Commit to working towards reducing transmission of HIV among people who inject drugs by 50 per cent by 2015 (para. 63);
 - (iii) Commit to working towards the elimination of mother-tochild transmission of HIV and substantially reducing AIDS-related maternal deaths by 2015 (para. 64);
- (c) Treatment, care and support: eliminating AIDS-related illness and death:
 - (i) Commit to accelerate efforts to achieve the goal of universal access to antiretroviral treatment for those eligible based on World Health Organization HIV treatment guidelines that indicate timely initiation of quality assured treatment for its maximum benefit, with the target of working towards having 15 million people living with HIV on antiretroviral treatment by 2015 (para. 66);
 - (ii) Commit to remove before 2015, where feasible, obstacles that limit the capacity of low- and middle-income countries to provide affordable and effective HIV prevention and treatment products, diagnostics, medicines and commodities and other pharmaceutical products, as well as treatment for opportunistic infections and coinfections, and to reduce costs associated with life-long chronic care, including by amending national laws and regulations, as deemed appropriate by respective Governments, so as to optimize:
 - a. The use, to the full, of existing flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) specifically geared to promoting access to and trade in medicines, and, while recognizing the importance of the intellectual property rights regime in contributing to a more effective AIDS response, ensure that intellectual property rights provisions in trade agreements do not undermine these existing flexibilities, as confirmed in the Doha Declaration on the TRIPS Agreement and Public Health, and call for early acceptance of the amendment to article 31 of the TRIPS Agreement adopted by the General Council of the World Trade Organization in its decision of 6 December 2005:

- b. Addressing barriers, regulations, policies and practices that prevent access to affordable HIV treatment by promoting generic competition in order to help reduce costs associated with life-long chronic care, and by encouraging all States to apply measures and procedures for enforcing intellectual property rights in such a manner as to avoid creating barriers to the legitimate trade in medicines, and to provide for safeguards against the abuse of such measures and procedures;
- c. Encouraging the voluntary use, where appropriate, of new mechanisms such as partnerships, tiered pricing, open-source sharing of patents and patent pools benefiting all developing countries, including through entities such as the Medicines Patent Pool, to help reduce treatment costs and encourage development of new HIV treatment formulations, including HIV medicines and point-of-care diagnostics, in particular for children (para. 71);
- (iii) Commit by 2015 to address factors that limit treatment uptake and contribute to treatment stock-outs and delays in drug production and delivery, inadequate storage of medicines, patient drop-out, including inadequate and inaccessible transportation to clinical sites, lack of accessibility of information, resources and sites, especially for persons with disabilities, sub-optimal management of treatment-related side effects, poor adherence to treatment, out-of-pocket expenses for non-drug components of treatment, loss of income associated with clinic attendance, and inadequate human resources for health care (para. 73);
- (iv) Expand efforts to combat tuberculosis, which is a leading cause of death among people living with HIV, by improving tuberculosis screening, tuberculosis prevention, access to diagnosis and treatment of tuberculosis and drug-resistant tuberculosis and access to antiretroviral therapy, through more integrated delivery of HIV and tuberculosis services in line with the Global Plan to Stop TB 2011-2015, and commit by 2015 to work towards reducing tuberculosis deaths in people living with HIV by 50 per cent (para. 75);

(d) Resources for the AIDS response:

- (i) Commit to working towards closing, by 2015, the global HIV and AIDS resource gap, currently estimated by the Joint United Nations Programme on HIV/AIDS to be 6 billion dollars annually, through greater strategic investment, continued domestic and international funding to enable countries to access predictable and sustainable financial resources and sources of innovative financing, and by ensuring that funding flows through country finance systems, where appropriate and available, and is aligned with accountable and sustainable national HIV and AIDS and development strategies that maximize synergies and deliver sustainable programmes that are evidence-based and implemented with transparency, accountability and effectiveness (para. 86);
- (ii) Commit by 2015, through a series of incremental steps and through our shared responsibility, to reach a significant level of annual global expenditure on HIV and AIDS, while recognizing that the overall target estimated by the Joint United Nations Programme

- on HIV/AIDS is between 22 billion and 24 billion dollars in lowand middle-income countries, by increasing national ownership of HIV and AIDS responses through greater allocations from national resources and traditional sources of funding, including official development assistance (para. 88);
- (iii) Strongly urge those developed countries which have pledged to achieve the target of 0.7 per cent of their gross national product for official development assistance by 2015, and urge those developed countries that have not yet done so, to take additional concrete efforts to fulfil their commitments in this regard (para. 89);
- (iv) Appreciate that the Global Fund to Fight AIDS, Tuberculosis and Malaria is a pivotal mechanism for achieving universal access to prevention, treatment, care and support by 2015, recognize the programme for reform of the Global Fund, and encourage Member States, the business community, including foundations, and philanthropists to provide the highest level of support for the Global Fund, taking into account the funding targets to be identified at the 2012 midterm review of the Global Fund replenishment process (para. 95);
- Strengthening health systems and integrating HIV and AIDS with broader health and development: Commit, by 2015, to working with partners to direct resources to and strengthen the advocacy, policy and programmatic links between HIV and tuberculosis responses, primary health-care services, sexual and reproductive health, maternal and child health, hepatitis B and C, drug dependence, non-communicable diseases and overall health systems, leveraging health-care services to prevent mother-to-child transmission of HIV, strengthening the interface between HIV services, related sexual and reproductive health care and services and other health services, including maternal and child health, eliminating parallel systems for HIV-related services and information where feasible, and strengthening linkages among national and global efforts concerned with human and national development, including poverty eradication, preventative health care, enhanced nutrition, access to safe and clean drinking water, sanitation, education and the improvement of livelihoods (para. 98);
- (f) Coordination, monitoring and accountability: maximizing the response: Commit to revise by the end of 2012 the recommended framework of core indicators that reflect the commitments made in the 2011 Political Declaration on HIV and AIDS and to develop additional measures, where necessary, to strengthen national, regional and global coordination and monitoring mechanisms of HIV and AIDS responses through inclusive and transparent processes with the full involvement of Member States and other relevant stakeholders, with the support of the Joint United Nations Programme on HIV/AIDS (para. 103);
- (g) Follow-up: sustaining progress: Request the Secretary-General to provide to the General Assembly an annual report on progress achieved in realizing the commitments made in the present Declaration, and, with support from the Joint United Nations Programme on HIV/AIDS, to report to the Assembly progress in accordance with global reporting on the Millennium Development Goals at the 2013 and subsequent reviews (para. 105).

III. Reducing stigma, discrimination and violence related to HIV

- 9. In the Declaration, Member States committed to intensifying national efforts to create enabling legal, social and policy frameworks in each national context in order to eliminate stigma, discrimination and violence related to HIV and promote access to HIV prevention, treatment, care and support. They also committed to reviewing, as appropriate, laws and policies that adversely affect the successful, effective and equitable delivery of HIV prevention, treatment, care and support programmes to people living with and affected by HIV, and to considering their review in accordance with relevant national review frameworks and time frames.
- 10. The Declaration contains commitments to national HIV and AIDS strategies that promote and protect human rights, including programmes aimed at eliminating stigma and discrimination against people living with and affected by HIV, including their families, including, also, by sensitizing the police and judges.

11. Commitments have also been made:

- (a) To ensuring that national responses to HIV and AIDS meet the specific needs of women and girls by strengthening legal, policy, administrative and other measures for the promotion and protection of women's full enjoyment of all human rights and the reduction of their vulnerability to HIV through the elimination of all forms of discrimination, as well as all types of sexual exploitation of women, girls and boys, and all forms of violence against women and girls;
- (b) To strengthening national social and child protection systems and care and support programmes for children, in particular for the girl child, and adolescents affected by and vulnerable to HIV;
- (c) To promoting laws and policies that ensure the full realization of all human rights and fundamental freedoms for young people, particularly those living with HIV and those at higher risk of HIV infection, so as to eliminate the stigma and discrimination they face.

IV. ESCAP resolution 66/10 on a regional call for action to achieve universal access to HIV prevention, treatment, care and support in Asia and the Pacific

12. The Commission in its resolution 66/10 of 19 May 2010 had stressed the need to intensify actions to achieve universal access to HIV prevention, treatment, care and support, "noting with particular concern the continuing high prevalence of HIV among key affected populations, including sex workers, injecting drug users and men who have sex with men, as well as the extent of the legal and policy barriers that impede progress in developing and implementing effective ways of responding to HIV and related risks among them." In the above-mentioned resolution, the Commission called upon members and associate members:

- (a) To accelerate the implementation of the Political Declaration on HIV/AIDS adopted by the General Assembly at its sixtieth session (para. 1a);²
- (b) To reinforce commitments to the Millennium Development Goal target of universal access to treatment for HIV and AIDS for those who need it, in terms of measurable, sustained advances towards a significantly higher level of coverage for treatment and effective prevention interventions needed to manage diverse epidemics, with services being equitable, accessible, affordable, comprehensive and responsive to individual needs, especially for women and girls, through evidence-based and gender-responsive national strategic plans, taking into account relevant recommendations from the Commission on AIDS in Asia and the Commission on AIDS in the Pacific (para. 1b);
- (c) To ground universal access in human rights and undertake measures to address stigma and discrimination, as well as policy and legal barriers to effective HIV responses, in particular with regard to key affected populations (para. 1c);
- (d) To ensure the sustainability of the AIDS response by maintaining a sufficient level of investment, both domestic and external, with the financial and human resources necessary to halt and reverse the spread of HIV in the countries in the region, including by linking HIV and AIDS with Millennium Development Goals and development plans (para. 1d).

V. ESCAP resolution 67/9 on the Asia-Pacific regional review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS

- 13. The Commission further reinforced the call to intensify regional action to fight HIV/AIDS in May 2011, when it adopted resolution 67/9 on the Asia-Pacific regional review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS. It acknowledged the progress made by Governments in Asia and the Pacific during the past decade in addressing the HIV epidemic, which had resulted in a 20 per cent decline in new infections and a stabilization of the AIDS-related mortality rate. At the same time, it noted with concern the continuing barriers to access to HIV prevention, treatment, care and support faced by key affected populations, particularly sex workers, injecting drug users, men who have sex with men and transgender populations.
- 14. In the above-mentioned resolution, the Commission called upon members and associate members:
- (a) To develop national strategic plans and establish strategic and operational partnerships at the national and community levels between

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² General Assembly resolution 60/262, annex.

The Declaration of Commitment on HIV/AIDS was adopted by the General Assembly in its resolution S-26/2. The 2006 Political Declaration on HIV/AIDS was adopted by the Assembly in its resolution 60/262.

representatives of public health, law enforcement and civil society and key affected populations to scale up high-impact HIV prevention, treatment, care and support to achieve 80 per cent coverage for key affected populations with a view to achieving the universal access target (para. 1a);

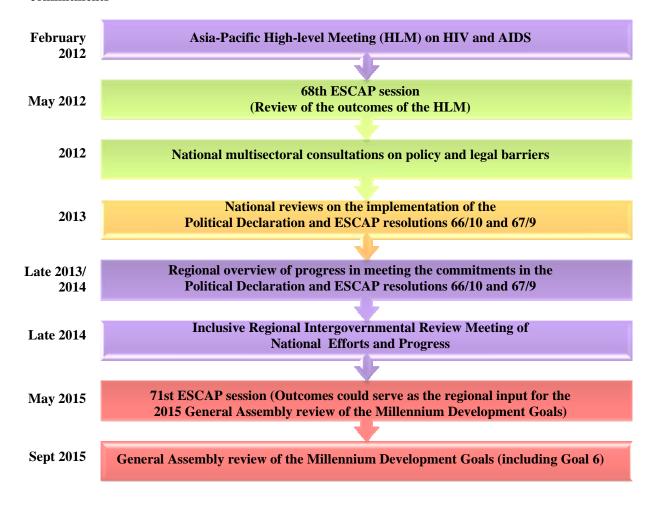
- (b) To enhance financial sustainability, national ownership and capacity, as well as to commit a greater proportion of national resources in line with national priorities, to improve the programmatic effectiveness of responses to HIV (para. 1b);
- (c) To consider processes that encourage stakeholder consultation in promoting access to affordable medicines, diagnostics and vaccines, bearing in mind the relevant provisions in General Assembly resolution 60/262 (the Political Declaration on HIV/AIDS) (para. 1c);
- (d) To initiate, as appropriate, in line with national priorities, a review of national laws, policies and practices to enable the full achievement of universal access targets with a view to eliminating all forms of discrimination against people at risk of infection or living with HIV, in particular key affected populations (para. 1d);
- (e) To increase the effectiveness of national responses by prioritizing high-impact interventions for key affected populations, reducing service delivery costs, improving accountability mechanisms and ensuring that monitoring, evaluation and reporting frameworks are focused on impact, outcomes, cost-effectiveness and efficiency and are also well integrated into relevant planning processes, relating to both HIV-specific planning and more comprehensive development planning (para. 1e);
- (f) To continue developing their national strategies to address all forms of gender-based violence, including sexual violence, particularly against women and girls (para. 1f).

VI. Regional framework to support the implementation of international and region-specific commitments

- 15. The implementation of the above-mentioned international and region-specific commitments will require high-level political will and strong, accountable leadership as well as meaningful partnerships between Governments with all stakeholders at all levels.
- 16. The Asia-Pacific High-level Intergovernmental Meeting on the Assessment of Progress against Commitments in the Political Declaration on HIV/AIDS and the Millennium Development Goals is the first regional intergovernmental meeting to be held since the adoption of the Political Declaration on HIV and AIDS: Intensifying our Efforts to Eliminate HIV and AIDS in June 2011. ESCAP members and associate members have the opportunity to decide on how they would wish to cooperate at the regional level in implementing both the Political Declaration, including preparation for the mandated regional periodic inclusive reviews of national efforts and progress to combat HIV in Asia and the Pacific, and the region-specific commitments contained in resolutions 66/10 and 67/9.
- 17. The following are the proposed activities that could feed into the mandated regional and global reviews of progress in meeting the above-mentioned commitments (see figure).

Figure

Regional framework to support the implementation of international and region-specific commitments



- A. Review by the Commission at its sixty-eighth session, in 2012, of the outcome of the Asia-Pacific High-level Intergovernmental Meeting on the Assessment of Progress against the Commitments in the Political Declaration on HIV/AIDS and the Millennium Development Goals
 - 18. In accordance with the established practice of the Commission, the report of the Meeting will be submitted for consideration and a decision by the Commission at its sixty-eighth annual session, in 2012.
- B. Organization of national multisectoral consultations, as appropriate, on policy and legal barriers to universal access in 2012
 - 19. Both the Declaration and ESCAP resolution 67/9 call for reviews, as appropriate, of "national laws, policies and practices to enable the full achievement of universal access targets with a view to eliminating all forms of discrimination against people at risk of infection or living with HIV, in particular key affected populations." Similar to the Meeting, these national consultations should be multisectoral, initiating a dialogue between the

health sector and other sectors, including justice, law enforcement, drug control. The United Nations system stands ready to support Governments, upon request, in the conduct of these national consultations and reviews. Further, ESCAP members and associate members may wish to consider reviewing the findings and recommendations of the Global Commission on HIV and the Law as well as engaging with key stakeholders, including civil society and key affected populations, in the conduct of these reviews. In addition, ESCAP members and associate members may wish to address gender-related concerns in the national reviews.

C. Undertaking of national reviews on the implementation of the Declaration and ESCAP resolutions 66/10 and 67/9

20. In the Declaration, Governments have committed to having evidence-based operational monitoring and evaluation and mutual accountability mechanisms between all stakeholders to support multisectoral national strategic plans for HIV and AIDS to fulfil the commitments in the Declaration, with the active involvement of people living with, affected by and vulnerable to HIV, and other relevant civil society and private sector stakeholders. The Meeting may wish to consider the possibility of undertaking national reviews of progress in the implementation of the commitments in the Declaration with a view to promoting accountability and sustaining progress.

D. Preparation of a regional overview of the progress in meeting the commitments in the Declaration and ESCAP resolutions 66/10 and 67/9 in late 2013/2014

21. In its resolution 67/9, the Commission called upon the Executive Secretary to coordinate with other relevant United Nations agencies to produce an overview of the progress made in achieving universal access. It is proposed that, in fulfilling this mandate from the Commission, the secretariat prepare the progress report in consultation with ESCAP members and associate members and with the support of the Joint United Nations Programme on HIV/AIDS (UNAIDS). The overview report could provide a basis for deliberations by Governments when they convene the proposed inclusive regional intergovernmental review meeting in late 2014 to assess national efforts and progress to combat HIV, as mandated in the Declaration.

E. Convening, in late 2014, the inclusive regional intergovernmental review meeting of national efforts and progress to address the HIV epidemic

22. As the Declaration mandates the regional commissions to conduct periodic inclusive reviews of national efforts and progress to combat HIV, it is proposed that the above-mentioned regional review meeting be convened by ESCAP in late 2014 in cooperation with UNAIDS and other relevant United Nations entities. The meeting would provide ESCAP members and associate members, inter alia, with the opportunity to: (a) review national progress in meeting the commitments contained in the Declaration and in ESCAP resolutions 66/10 and 67/9; (b) exchange national experiences in implementing the commitments related to the HIV and AIDS response; and (c) assess the outcomes of the national reviews of policy and legal barriers to universal access to HIV prevention, treatment, care and support.

- F. Assessment by the Commission at its seventy-first session, in 2015, of the outcome of the inclusive regional intergovernmental review meeting, including the adoption of the regional input for the 2015 General Assembly review of the Millennium Development Goals
 - 23. The outcome of the above-mentioned regional intergovernmental review would be submitted for consideration and a decision by the Commission at its seventy-first session, in 2015. In accordance with past practice, the Commission at that session may wish to submit a regional input for the global review of progress to be undertaken by the General Assembly in 2015.

VII. Conclusion

24. ESCAP members and associate members have committed to intensifying the response to HIV and AIDS, including redoubling efforts to achieve, by 2015, universal access to HIV prevention, treatment, care and support as a critical step towards ending the HIV epidemic, with a view to achieving Millennium Development Goal 6, in particular to halt and begin to reverse the spread of HIV. To achieve this goal, they have committed to decisive, inclusive and accountable leadership to fully implement the commitments, goals and targets contained in the Declaration. They have also stressed the importance of international and regional cooperation, particularly in the exchange of information, research, evidence and experiences in implementing the measures and commitments related to the HIV and AIDS response. The Meeting may thus wish to consider and endorse the regional framework proposed in the present document to support the implementation of the commitments made by member States in the Declaration as well as ESCAP resolutions 66/10 and 67/9.

12