

2 June 2006

Draft Political Declaration

1. We, heads of State and Government and representatives of States and Governments participating in the comprehensive review of the progress achieved in realizing the targets set out in the Declaration of Commitment on HIV/AIDS on 31 May and 1 June 2006 and the High-Level Meeting on 2 June 2006;
2. **Note with alarm** that we are facing an unprecedented human catastrophe and that a quarter of a century into the pandemic, AIDS has inflicted immense suffering on countries and communities throughout the world, and that more than 65 million people have been infected with HIV, more than 25 million people have died, 15 million children have been orphaned by AIDS, with millions more made vulnerable, and 40 million people are currently living with HIV, more than 95 per cent of whom are in developing countries;
3. **Recognize** that HIV/AIDS constitutes a global emergency and poses one of the most formidable challenges to development, progress, and stability of our respective societies and the world at large and requires an exceptional and comprehensive global response;
4. **Acknowledge** that national and international efforts have resulted in important progress since 2001 in the areas of funding, expanding access to HIV prevention, treatment, care and support and in mitigating the impact of AIDS, and in reducing HIV prevalence in a small but growing number of countries, and also acknowledge that many targets contained in the Declaration of Commitment on HIV/AIDS have not yet been met;
5. **Commend** the UNAIDS Secretariat and the Cosponsors for their leadership role on HIV/AIDS policy and coordination, and for the support they provide to countries through the Joint United Nations Programme on HIV/AIDS;
6. **Recognize** the contribution of, and the role played by various donors in combating HIV/AIDS as well as the fact that one-third of resources spent on HIV/AIDS responses in 2005 came from the domestic sources of low-and middle-income countries and therefore emphasize the importance of enhanced international cooperation and partnership in our responses to HIV/AIDS worldwide;
7. **Remain deeply concerned**, however, by the overall expansion and feminisation of the pandemic and that women now represent half of all people living with HIV including nearly 60 percent in Africa, and in this regard, recognize that gender inequalities and all forms of violence against women and girls increase their vulnerability to HIV/AIDS;
8. **Express grave concern** that half of all new HIV infections are among children and young people under the age of 25 and that there is a lack of information, skills and knowledge regarding HIV/AIDS among young people;

9. **Also remain gravely concerned** that today 2.3 million children are living with HIV/AIDS, and recognize that the lack of paediatric drugs in many countries significantly hinders efforts to protect the health of children;
10. **Reiterate with profound concern** that the pandemic affects every region and that Africa, in particular Sub-Saharan Africa, remains the worst affected region and that urgent and exceptional action is required at all levels to curb the devastating effects of this pandemic, and recognize the renewed commitment by African governments and regional institutions to scale up their own HIV/AIDS responses;
11. **Reaffirm** that the full realization of all human rights and fundamental freedoms for all is an essential element in the global response to the HIV/AIDS pandemic, including in the areas of prevention, treatment, care and support, and recognize that addressing stigma and discrimination is also a critical element in combating the global HIV/AIDS pandemic;
12. **Reaffirm** that access to medication in the context of pandemics such as HIV/AIDS is one of the fundamental elements to achieve progressively the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health;
13. **Recognize** that in many parts of the world, the spread of HIV/AIDS is a cause and consequence of poverty and effectively combating HIV/AIDS is essential to achieving internationally agreed development goals and objectives, including the Millennium Development Goals;
14. **Recognize** that we now have the means to reverse the global pandemic and to avert millions of needless deaths, and also recognize that to be effective, we must deliver an intensified, much more urgent and comprehensive response in partnership with the United Nations system, intergovernmental organizations, people living with HIV and vulnerable groups, medical, scientific and educational institutions, non-governmental organizations, the business sector including generic and research – based pharmaceutical companies, trade unions, the media, parliamentarians, foundations, community organizations, faith-based organizations and traditional leaders;
15. **Recognize also** that to mount a comprehensive response, we must overcome any legal, regulatory, trade and other barriers that block access to prevention, treatment, care and support; commit adequate resources; promote and protect all human rights and fundamental freedoms for all; promote gender equality and empowerment of women; promote and protect the rights of the girl child in order to reduce their vulnerability to HIV/AIDS; strengthen health systems and support health workers; support greater involvement of people living with HIV; scale up use of known effective and comprehensive prevention interventions; do everything necessary to ensure access to life-saving drugs and prevention tools; and develop just as urgently better tools – drugs, diagnostics and prevention technologies, including vaccines and microbicides – for the future;

16. **Convinced** that without renewed political will, strong leadership and sustained commitment and concerted efforts from all stakeholders at all levels, including people living with HIV, civil society and vulnerable groups, and without increased resources, the world will not succeed in bringing about the end of the pandemic.
17. **Solemnly declare** our commitment to address the HIV/AIDS crisis by taking action as follows, taking into account the diverse situations and circumstances in different regions and countries throughout the world;

Therefore, we:

18. **Reaffirm** our commitment to implement fully the Declaration of Commitment on HIV/AIDS “*Global Crisis - Global Action*” adopted at the twenty-sixth special session of the General Assembly in 2001 and to achieve the internationally agreed development goals and objectives, including the Millennium Development Goals, and in particular the goal to halt and begin to reverse the spread of HIV/AIDS, Malaria and other major diseases, the agreements dealing with HIV/AIDS reached at all major United Nations conferences and summits, including the 2005 World Summit and its statement on treatment, and the goal of achieving universal access to reproductive health by 2015, as set out at the International Conference on Population and Development;
19. **Recognize** the importance and encourage the implementation of the recommendations of the inclusive, country-driven processes and regional consultations facilitated by the Joint United Nations Programme on HIV/AIDS and its Cosponsors for scaling up HIV prevention, treatment, care and support and strongly recommend that this approach be continued;
20. **Commit** to pursue all necessary efforts to scale up nationally driven, sustainable and comprehensive responses to achieve broad multisectoral coverage for prevention, treatment, care and support, with full and active participation of people living with HIV, vulnerable groups, most affected communities, civil society and the private sector, towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010;
21. **Emphasize** the need to strengthen policy and programme linkages and coordination between HIV/AIDS, sexual and reproductive health, national development plans and strategies, including poverty eradication strategies, and to address, where appropriate, the impact of HIV/AIDS on national development plans and strategies;
22. **Reaffirm** that prevention of HIV infection must be the mainstay of the national, regional and international responses to the pandemic and therefore commit to intensify efforts to ensure that a wide range of prevention programs which take account of local circumstances, ethics and cultural values, is available in all countries, particularly the most affected countries, including information, education and communication, in languages most understood by communities and respectful of cultures, aimed at reducing risk-taking behaviours and encouraging responsible

sexual behaviour, including abstinence and fidelity; expanded access to essential commodities, including male and female condoms and sterile injecting equipment; harm-reduction efforts related to drug use; expanded access to voluntary and confidential counselling and testing; safe blood supplies; and early and effective treatment of sexually transmitted infections;

23. **Reaffirm** that prevention, treatment, care and support for those infected and affected by HIV/AIDS are mutually reinforcing elements of an effective response and must be integrated in a comprehensive approach to combat the pandemic;
24. **Commit** to overcome legal, regulatory or other barriers that block access to effective HIV prevention, treatment, care and support, medicines, commodities and services;
25. **Pledge** to promote at the international, regional, national and local levels access to HIV/AIDS education, information, voluntary counselling and testing and related services, with full protection of confidentiality and informed consent, and to promote social and legal environment that is supportive of and safe for voluntary disclosure of HIV status;
26. **Commit** to address the rising rates of HIV infection among young people to ensure an HIV-free future generation through the implementation of comprehensive, evidence-based prevention strategies, responsible sexual behaviour, including the use of condoms, evidence- and skills-based, youth specific HIV education, mass media interventions, and the provision of youth friendly health services;
27. **Commit** to ensure further that pregnant women have access to antenatal care, information, counselling and other HIV services and to increase the availability of and access to effective treatment to women living with HIV and infants in order to reduce mother-to-child transmission of HIV, as well as through effective interventions for women living with HIV, including voluntary and confidential counselling and testing, with informed consent, access to treatment, especially life-long antiretroviral therapy and, where appropriate, breast-milk substitutes and the provision of a continuum of care;
28. **Resolve** to integrate food and nutritional support, with the goal that all people at all times, will have access to sufficient, safe, and nutritious food to meet their dietary needs and food preferences, for an active and healthy life, as part of a comprehensive response to HIV/AIDS;
29. **Commit** to intensify efforts to enact, strengthen or enforce, as appropriate, legislation, regulations and other measures to eliminate all forms of discrimination against and to ensure the full enjoyment of all human rights and fundamental freedoms by people living with HIV and members of vulnerable groups, in particular to ensure their access to, inter alia, education, inheritance, employment, health care, social and health services, prevention, support and treatment, information and legal protection, while respecting their privacy and confidentiality; and develop strategies to combat stigma and social exclusion connected with the epidemic;

30. **Pledge** to eliminate gender inequalities, gender-based abuse and violence, and to increase capacities of women and adolescent girls to protect themselves from the risk of HIV infection, principally through the provision of health care and services, including, inter alia, sexual and reproductive health, and full access to comprehensive information and education, and ensure that women can exercise their right to have control over and decide freely and responsibly on matters related to their sexuality to increase their ability to protect themselves from HIV infection, including their sexual and reproductive health, free of coercion, discrimination and violence, and take all necessary measures to create an enabling environment for the empowerment of women and to strengthen their economic independence and in this context, reiterate the importance of the role of men and boys in achieving gender equality;
31. **Commit** to strengthening legal, policy, administrative and other measures for the promotion and protection of women's full enjoyment of all human rights and reduction of their vulnerability to HIV/AIDS through the elimination of all forms of discrimination, as well as all types of sexual exploitation of women, girls and boys, including for commercial reasons, and all forms of violence against women and girls, including harmful traditional and customary practices, abuse, rape and other forms of sexual violence, battering and trafficking in women and girls;
32. **Commit** to address as a priority the vulnerabilities faced by children affected by and living with HIV, to provide support and rehabilitation to these children and their families, women and the elderly, particularly in their role as caregivers, to promote child-oriented HIV/AIDS policies and programmes, and increased protection for children orphaned and affected by HIV/AIDS, to ensure access to treatment and intensify efforts to develop new treatments for children, and to build, where needed, and to support the social security systems that protect them;
33. **Emphasize** the need for accelerated scale-up of collaborative activities on tuberculosis and HIV in line with the Global Plan to stop TB 2006-2015 and investment in new drugs, diagnostics and vaccines appropriate for people with TB-HIV co-infection;
34. **Commit** to expand to the greatest extent possible, supported by international cooperation and partnership, our capacity to deliver comprehensive HIV/AIDS programmes in ways that strengthen existing national health and social systems, including by integrating HIV/AIDS intervention into programmes for primary health care, mother and child health, sexual and reproductive health, tuberculosis, hepatitis C, sexually transmitted infections, nutrition, children affected, orphaned or made vulnerable by HIV/AIDS, as well as formal and informal education;
35. **Undertake** to reinforce, adopt and implement, where needed, national plans and strategies, supported by international cooperation and partnership, to increase capacity of human resources for health to meet the urgent need for training and retention of a broad range of health workers including community-based health workers, improve training and management and working conditions including

treatment for health workers, and to effectively govern the recruitment, retention and deployment of new and existing health workers to mount a more effective HIV/AIDS response;

36. **Commit** ourselves, invite international financial institutions and the Global Fund to fight AIDS, Tuberculosis and Malaria according to its policy framework and encourage other donors to provide additional resources to low- and middle- income countries for the strengthening of HIV/AIDS programmes and health systems, and for addressing human resources gaps, including the development of alternative and simplified service delivery models and the expansion of community-level provision of HIV/AIDS prevention, treatment, care and support, as well as other health and social services;
37. **Reiterate** the need for governments, the United Nations agencies, regional and international organizations as well as non-governmental organizations involved with the provision and delivery of assistance to countries and regions affected by conflicts, humanitarian emergencies or natural disasters to incorporate HIV/AIDS prevention, care and treatment elements into their plans and programmes;
38. **Pledge** to provide the highest level commitment to ensure that costed, inclusive, sustainable, credible and evidence-based national HIV/AIDS plans are funded and implemented with transparency, accountability and effectiveness, in line with national priorities;
39. **Commit** to reduce the global HIV/AIDS resource gap through greater domestic and international funding to enable countries to have access to predictable and sustainable financial resources and to ensure that international funding is aligned with national HIV/AIDS plans and strategies, and in this regard welcome the increased resources that are being made available through bilateral and multilateral initiatives, as well as those that will become available as a result of the establishment of timetables by many developed countries to achieve the targets of 0.7 per cent of gross national product for official development assistance by 2015 and to reach at least 0.5 per cent of gross national product for official development assistance by 2010 as well as, pursuant to the Brussels Programme of Action for the Least Developed Countries for the Decade 2001-2010, 0.15 per cent to 0.20 per cent for the least developed countries no later than 2010, and urge those developed countries that have not yet done so to make concrete efforts in this regard in accordance with their commitments;
40. **Recognize** that the Joint United Nations Programme on HIV/AIDS estimated that 20 to 23 billion dollars is needed per annum by 2010 to support rapidly scaled-up AIDS responses in low and middle income countries, and therefore commit to take measures to ensure that new and additional resources are made available from donor countries and also from national budgets and other national sources;
41. **Commit** to support and strengthen existing financial mechanisms, including the Global Fund to fight HIV/AIDS, Tuberculosis and Malaria, as well as relevant United Nations organizations, through provision of funds in a sustained manner,

while continuing to develop innovative sources of financing, as well as pursuing other efforts, aimed at generating additional funds;

42. **Commit** to find appropriate solutions to overcome barriers in pricing, tariffs and trade agreements, and to make improvement in legislation, regulatory policy, procurement and supply chain management, in order to accelerate and intensify access to affordable and quality HIV/AIDS prevention products, diagnostics, medicines and treatment commodities;
43. **Reaffirm** that the World Trade Organization's Agreement on Trade-Related Aspects of Intellectual Property Rights does not and should not prevent members from taking measures now and in the future to protect public health. Accordingly, while reiterating our commitment to the TRIPS Agreement, reaffirm that the Agreement can and should be interpreted and implemented in a manner supportive of the right to protect public health and, in particular, to promote access to medicines for all including production of generic antiretroviral drugs and other essential drugs for AIDS-related infections. In this connection, we reaffirm the right to use, to the full, the provisions in the TRIPS Agreement, the Doha Declaration on TRIPS Agreement and Public Health and the World Trade Organization's General Council Decision of 2003 and the amendments to Article 31, which provide flexibilities for this purpose;
44. **Resolve** to assist developing countries to enable them to employ flexibilities outlined in the World Trade Organization's Agreement on TRIPS and to strengthen their capacities for this purpose;
45. **Commit** to intensify investment in and efforts towards the research and development of new, safe and affordable HIV/AIDS-related medicines, products and technologies, such as vaccines, female-controlled methods and microbicides, paediatric antiretroviral formulations, including through such mechanisms as Advance Market Commitments, as well as encourage increased investment in HIV/AIDS-related research and development in traditional medicine;
46. **Encourage** pharmaceutical companies, donors, multilateral organizations, and other partners to develop public-private partnerships in support of research and development and technology transfer, and in the comprehensive HIV/AIDS response;
47. **Also encourage** bilateral, regional and international efforts in promoting bulk procurement, price negotiations, and licensing to lower prices for HIV prevention products, diagnostics, medicines and treatment commodities, while recognizing that intellectual property protection is important for the development of new medicines and also recognize the concerns about its effects on prices ;
48. **Recognize** the initiative by a group of countries such as the International Drug Purchase facility, based on innovative financing mechanisms which are aimed at providing further drug access at affordable prices to developing countries on a sustainable and predictable basis;

49. **Commit** to set in 2006, through inclusive, transparent processes, ambitious national targets, including interim targets for 2008 in accordance with core indicators recommended by the Joint United Nations Programme on HIV/AIDS, that reflect the commitment of this Declaration and the urgent need to scale up significantly towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010, as well as to set and maintain sound and rigorous monitoring and evaluation frameworks within their HIV/AIDS strategies;
50. **Call on** the Joint United Nations Programme on HIV/AIDS, including its cosponsors to assist national efforts to coordinate the HIV/AIDS response, as elaborated in the “Three Ones” principles, and in line with recommendations of the ‘Global Task Team on Improving AIDS Coordination among Multilateral Institutions and International Donors’, to assist national and regional efforts to monitor and report on efforts to achieve the targets above, and to strengthen global coordination on HIV/AIDS, including through the thematic sessions of the Programme Coordinating Board;
51. **Also call on** Governments, national parliaments, donors, regional and sub-regional organizations, organizations of the United Nations system, the Global Fund to fight HIV/AIDS, Tuberculosis and Malaria, civil society, people living with HIV, vulnerable groups, private sector, communities most affected by HIV/AIDS and other stakeholders to work closely together to achieve the targets above, and to ensure accountability and transparency at all levels through participatory reviews of HIV/AIDS responses;
52. **Request** the Secretary-General of the United Nations, with the support of the Joint United Nations Programme on HIV/AIDS, to include in his annual report to the General Assembly on the status of implementation of the Declaration of Commitment on HIV/AIDS in accordance with resolution S-26/2 of 27 June 2001 the progress achieved in realizing the commitments set out in the present Declaration;
53. **Decide** to undertake comprehensive reviews in 2008 and 2011 within the annual review of the General Assembly on the progress achieved in realizing the Declaration of Commitment on HIV/AIDS “*Global Crisis – Global Action*” adopted at the twenty-sixth special session and this present Declaration.