

**UNITED NATIONS ECONOMIC AND SOCIAL COUNCIL
MANAGEMENT SEGMENT
AGENDA ITEM 12 (h): Joint United Nations Programme on HIV/AIDS (UNAIDS)
(25 July 2023, New York)**

**STATEMENT BY Ms ANGELI ACHREKAR
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Madame President,
Excellencies,
Distinguished Delegates,

I am honoured to present the report to ECOSOC of behalf of our Executive Director of the Joint United Nations Programme on HIV/AIDS.

The global AIDS pandemic

HIV/AIDS continues to be one of the deadliest pandemics of our times:

- 39 million people were living with HIV at the end of 2022, including 1.5 million children.
- One person dies of AIDS-related causes every minute, another person is newly infected with HIV every 20 seconds.

Yet, over the past 40 years+, we have seen remarkable progress in the global HIV response:

- About a week and a half ago, the Joint United Nation's Program on HIV/AIDS (UNAIDS) released the world's latest data on the progress of the HIV response in our annual Global AIDS Update Report
- This year's report – The Path That Ends AIDS - makes it crystal clear that there is a path to end AIDS. Where the path has been followed, we see significant progress against HIV.
- Countries that are putting people and communities first in their policies and programmes are already leading the world on the journey to ending AIDS by 2030.
- Botswana, Eswatini, Rwanda, and Zimbabwe have already achieved the world's "95-95-95" HIV treatment targets.
- A further 16 countries are close to these targets.

29.8 million people living with HIV were on treatment in 2022 globally, nearly a fourfold increase in the number of people on HIV treatment since 2010. This progress is extraordinary.

In short, the world could end what has been one of the world's deadliest pandemics. By taking this path to end AIDS, the world would also ensure that it is more ready for other pandemic threats to come and help advance progress across many Sustainable Development Goals.

The gains made against HIV are a major public health and development achievement, but these gains are also fragile. In a world marked by multiple intersecting inequalities, lack of protection of human rights, stigma and discrimination, and structural and punitive laws that prevent or prohibit access to health services - not everyone is benefiting from this achievement.

- Every week 4,000 adolescent girls and young women acquire HIV.
- Treatment services are still missing 9.2 million people, many of them are from key populations and 660,000 are children that we are failing to care for.
- The HIV pandemic continues to impact key populations more than the general population. In 2022, HIV prevalence was 11 times higher among gay men and other men who have sex with men, 4 times higher among sex workers, 7 times higher among people who inject drugs, and 14 times higher among transgender people.

A backdrop to many of the remaining challenges is the widening funding gap for the global HIV response: US\$ 20.8 billion was available for HIV programmes in low- and middle-income countries in 2022 - 2.6% less than in 2021 and well short of the US\$ 29.3 billion needed by 2025.

There is an opportunity now to end AIDS by increasing political will and investing in a sustainable response to HIV through financing what matters most: evidence-based HIV prevention and treatment, health systems integration, non-discriminatory laws, gender equality, and empowered community networks. These are financial and political choices we have to make. And countries that are making them are leading.

UNAIDS Joint Programme leading the global efforts to end AIDS

The UNAIDS Joint Programme – has continued to lead global efforts to respond to AIDS, including for example to curb HIV among children through the Global Alliance to End AIDS in Children, and unwavering support to boost community-led AIDS responses in countries.

The UNAIDS Joint Programme – the only Joint Program bringing together the expertise, mandates, and reach of 11 different UN agencies is unique and impactful in all the world. Drawing upon its unique multisectoral experience, expertise, and presence in more than 100 countries, the Joint Programme remains strong and committed to support countries and communities in partnership with the Global Fund and PEPFAR – bringing data to guide the response, convening to bring political attention to the issues, and working to ensure more enabling and effective policies are in place to support the efforts.

However, the ability of UNAIDS to fulfil its mandate has been undermined by chronic underfunding. Financial resources available to the Joint Programme have been below the Board approved core budget by roughly 25% since 2016 – which impacts the capacity of the UNAIDS secretariate and the UN co-sponsors at a global, regional and country level. With the ambition of our targets and commitments from the members states, it is imperative to protect this capacity, which the Board has recognized and approved recently with the desire for the fully funded budget of \$210M.

Previous reviews by this Council have found that UNAIDS is an exemplary expression of UN reform in action. The Joint Programme has taken numerous steps to align its work with QCPR mandates, including:

- the adoption of the new generation of UNAIDS Unified Budget, Results and Accountability Framework 2022-2026.
- the establishment of an Independent and External Oversight Advisory Committee, following recommendations of the 2019 UN Joint Inspection Unit review

With more than 25 years' experience in spearheading a coordinated, multisectoral response to the HIV pandemic, UNAIDS continues to develop tools and approaches that are guiding UN Country Teams and inter-agency collaboration to drive progress towards the Agenda 2030 goals.

Madame President,

The inclusive multisectoral and multistakeholder joint programme model, reflected in its Board, remains more relevant than ever. It is encouraging that UN member states continue to see the value of the Joint Programme and express their support, including with the role of civil society, through the resolution you will be adopting today.

I would like to thank the PCB Chair and Vice-Chair, Germany and Kenya, for skillfully facilitating negotiations on the resolution in Geneva, and all member states for upholding the spirit of consensus guided by common purpose which has always characterized the AIDS response and the work of UNAIDS.

I count on all of you to accelerate your efforts to achieve our common goal to end AIDS as a public health threat by 2030. It can be done, if world leaders choose to do it. This could be their legacy.

And there will be many benefits beyond ending a single pandemic - Because ending AIDS is a powerful catalyst to achieve global health security and resilience.

I thank you all.