Statement on the occasion of the 2021
United Nations High-Level Meeting on HIV/AIDS

Endorsed by the IPU Governing Council at its 207th session
(Virtual session, 25 May 2021)

The Governing Council,

- Noting the Inter-Parliamentary Union’s continued support over the years to the global AIDS response and engagement in United Nations high-level meetings on HIV/AIDS,

- Recalling United Nations General Assembly resolution 75/260 of 23 February 2021 on the organization of the 2021 High-Level Meeting on HIV/AIDS inviting the Inter-Parliamentary Union to contribute to the meeting,


- Underlining that the world’s governments have set a target to end the AIDS epidemic by 2030 as part of the Sustainable Development Goals (in particular Goal 3, target 3),

- Welcoming the significant gains achieved in the AIDS response yet noting with concern that progress has been uneven among and within countries, and that gains remain fragile and reversible without renewed commitment, increased investments and accelerated action,

- Expressing deep concern that prior to the COVID-19 pandemic the world was not on track to meet the time-bound targets set out in the 2016 Political Declaration on HIV and AIDS, which expired at the end of 2020, and that the modelling of the COVID-19 pandemic’s long-term impact on the HIV response shows a setback with an estimated 123,000 to 293,000 additional new HIV infections and 69,000 to 148,000 additional AIDS-related deaths between 2020 and 2022,

- Noting that 2021 marks 40 years since the first case of AIDS was reported, 25 years since UNAIDS commenced its valuable work and 20 years since the creation of the Global Fund to Fight AIDS, Tuberculosis & Malaria, which provides 21 per cent of all international financing for the global HIV response; as well as that a new Global AIDS strategy for 2021-2026 has been adopted,

- Expressing concern that 38 million people globally were living with HIV in 2019, that more than 12 million people still do not have access to HIV treatment, and that 1.7 million people became infected with HIV in 2019 because they did not have access to essential HIV services,
Noting that HIV is not only driven by but also entrenches gender inequality, leaving HIV infected women more vulnerable to violence, coercion, stigma and discrimination, including violations of their sexual and reproductive rights, and that they are six times more likely to develop cervical cancer,

Noting also with concern that every week, around 5,500 young women aged between 15 and 24 years become infected with HIV, and that young women in Sub-Saharan Africa are twice as likely as men to be living with HIV,

Noting further that structural, legal, economic and other inequalities that foster stigma and discrimination increase HIV vulnerability, impede access to services and make key populations more likely to die of AIDS-related illnesses, as well as that, as reported by the Global AIDS Strategy 2021-2026, the risk of acquiring HIV is 13 times higher for transgender people, 26 times higher among gay men and other men who have sex with men, 29 times higher among people who inject drugs, and 30 times higher for sex workers,

Calls on parliaments to:

- Work to have States realize the right to health and implement health targets as part of the Sustainable Development Goals, including ending the AIDS epidemic by 2030.
- Bring HIV back to the public discourse since HIV continues to be a major public health crisis.
- Respond to the specific health needs of young women and adolescent girls and other groups of people disproportionately affected by HIV, particularly underserved communities such as indigenous and transgender populations, by raising awareness, ensuring prevention and access to treatment, and providing relevant services.
- Use both their mandate and public trust to engage communities and act in the interest of every citizen and every community, including people living with HIV and key populations, to build large scale public awareness and enable community mobilization towards a collective people’s movement to achieve the promise of better health outcomes and a reduction in disparities.
- Promote evidence-based, people-centred guidance and tools to promote the autonomy and self-efficacy of people living with and at risk of HIV, including through access to self-care interventions.
- Review existing legislation and repeal or amend laws, including age-restrictive laws, that undermine access to HIV and health services for all, and that criminalize HIV transmission to ensure that no one is left behind.
- Enact laws that protect and promote the human rights of all citizens, including their right to health; that protect people living with HIV, in particular young women and adolescent girls, and key populations against stigma and discrimination; and that ensure access to quality, affordable sexual and reproductive health services and rights.
- Use their oversight and budgetary powers and engage with global partners to enable effective prioritization and more efficient allocation of resources for HIV and health, given the fiscal pressures exacerbated by the COVID-19 pandemic, and support gender-sensitive budgeting as a tool for addressing women’s, girls’ and transgender people’s health needs.
- Commit to resume health services disrupted on account of the COVID-19 pandemic to ensure equitable access to HIV testing and treatment.

The Governing Council renews its call on all countries to:

- Renew at the 2021 United Nations High-Level Meeting on HIV/AIDS their commitment to global efforts to end the AIDS epidemic and achieve the Sustainable Development Goals by 2030.
• Protect the human rights of all persons without distinction in law and in practice and ensure all health policies and interventions are in conformity with international human rights standards.

• Strengthen already established strategic partnerships and create new ones that include governments, parliaments, affected communities, civil society, the private sector, academics, scientists and philanthropists.

• Mobilize adequate resources and funds to support the implementation and realize the objectives of the new Global AIDS Strategy 2021-2026, and also to mobilize all sources, public and private, domestic and international, to reverse the decrease in international support and close the US$ 7 billion funding gap for the global AIDS response.

• Apply the lessons learned from the colliding HIV epidemic and COVID-19 pandemic and, at the 2021 United Nations High-Level Meeting on HIV/AIDS, urge for more investments in global pandemic responses and the adoption of a new set of bold, ambitious but achievable HIV targets to end AIDS as a public health threat by 2030.

• Use the scientific progress achieved in developing effective mRNA vaccines against COVID-19 for the quick development of an HIV vaccine.

• Ensure that intellectual property rights are not an obstacle for any person living with HIV to receive modern antiretroviral therapy.