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## Resolution adopted by the General Assembly on 23 December 2003

[without reference to a Main Committee (A/58/L.54)]

### **58/236. Follow-up to the outcome of the twenty-sixth special session: implementation of the Declaration of Commitment on HIV/AIDS**

*The General Assembly,*

*Recalling* the goals and targets set forth in the Declaration of Commitment on HIV/AIDS<sup>1</sup> adopted by the General Assembly at its twenty-sixth special session, in 2001, and the HIV/AIDS-related goals contained in the United Nations Millennium Declaration of 2000,<sup>2</sup>

*Reaffirming* the commitment made by all States at the twenty-sixth special session of the General Assembly,

*Noting with profound concern* that 42 million people worldwide are living with HIV/AIDS, that the HIV/AIDS pandemic claimed 3.1 million lives in 2002 and to date has orphaned 14 million children,

*Noting with grave concern* that the majority of new HIV infections occur among young people and that women and girls are disproportionately affected by the pandemic,

*Noting* that the unequal legal and social status of women heightens their vulnerability to HIV,

*Expressing serious concern* about the continued global spread of HIV/AIDS, which exacerbates poverty and poses a major threat to economic and social development and to food security in heavily affected regions, while recognizing that poverty, underdevelopment and illiteracy are among the principal contributing factors to the spread of the disease,

*Noting* that the epidemic affects every region and, while sub-Saharan Africa remains worst affected, serious epidemics are present or emerging in the Caribbean, Eastern Europe and Asia and the Pacific,

<sup>1</sup> Resolution S-26/2, annex.

<sup>2</sup> See resolution 55/2.

*Acknowledging* that prevention, care, support and treatment 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 epidemic,

*Also acknowledging* the importance of maintaining an emphasis on prevention measures in countries with low prevalence rates,

*Recognizing* that, while the primary responsibility for responding to HIV/AIDS rests with Governments, the efforts and engagement of all sectors of society are essential to generating an effective response,

*Reaffirming* that the full realization of human rights and fundamental freedoms for all is an essential element in a global response to the HIV/AIDS pandemic, and reaffirming also the importance of the elimination of all forms of discrimination against people living with or at risk of HIV/AIDS, including those most vulnerable,

*Recognizing* that populations destabilized by armed conflict, humanitarian emergencies and natural disasters, including refugees, internally displaced persons and, in particular, women and children, are at increased risk of exposure to HIV infection,

*Encouraged* that civil society, especially organizations representing people living with HIV/AIDS, women, young persons, orphans, faith-based organizations and the private sector, is increasingly involved in national responses to HIV/AIDS, while noting the need for further engagement of these stakeholders at all levels,

*Acknowledging* the efforts of international humanitarian organizations, including the International Federation of Red Cross and Red Crescent Societies, in combating the epidemic in the most affected areas of the world,

*Noting* that strengthened political commitment, including at the highest level, as witnessed, inter alia, at the high-level General Assembly meeting on HIV/AIDS, held on 22 September 2003, demonstrates the resolve of Governments and the international community to intensify implementation and cooperation in order to meet the goals and targets contained in the Declaration of Commitment,

*Noting with appreciation* the support for national responses provided by the United Nations system, especially the secretariat of the Joint United Nations Programme on HIV/AIDS and Co-sponsors, inter alia, for effective country-led mechanisms, including the mobilization of financial resources, the facilitation and provision of technical assistance and support to the Global Fund to fight AIDS, Tuberculosis and Malaria and applicant countries, at every level of the grant-making process,

*Also noting with appreciation* the new strategic direction taken by the Joint Programme after the five-year evaluation of the Programme by its Programme Coordinating Board, encompassing, in particular, a greater focus on national-level processes, continued global leadership and advocacy, and a focus on the gender implications of HIV/AIDS,

*Encouraged* that the United Nations system has made progress towards integrating the consideration of HIV/AIDS in its activities, including addressing HIV/AIDS in the United Nations workplace, the appointment of HIV/AIDS focal points in peacekeeping operations and the work on guidelines for HIV/AIDS in emergency settings,

*Recognizing* the emergence of the World Bank Multi-Country HIV/AIDS Programme and the Global Fund to fight AIDS, Tuberculosis and Malaria and the contributions of private foundations as important sources of new and additional funding,

*Noting with concern* that, although many Member States have met the 2003 targets contained in the Declaration of Commitment, considerable gaps remain,

*Also noting with concern* that, at the current rate of implementation and fulfilment of commitments, many countries are unlikely to meet the targets for 2005,

*Recognizing* that many developing countries may not have the financial or human resources capacity to mount an effective response to the HIV/AIDS epidemic, and in this context underlining the importance of international cooperation,

*Noting* that, despite improvement, current global resources available for HIV/AIDS are less than half of the 10 billion United States dollars considered necessary for an effective response in 2005 alone and that substantial new funding will be required in order to meet the global resource targets,

*Also noting* that intensified implementation will require partnership and enhanced cooperation at all levels, as well as enhanced support for human and institutional capacity development and considerably increased financial resources,

*Further noting* that implementation has to be intensified through partnerships at the national, regional and international levels in order to offer infected and affected people and communities in developing countries and countries with economies in transition medicines and related technology which are affordable, easy to use and readily available,

*Encouraged* that an increasing number of companies in the private sector are offering prevention, care and treatment services to employees and their families, while noting the need for continued efforts in this regard,

*Recalling* Commission on Human Rights resolution 2003/47 of 23 April 2003,<sup>3</sup>

1. *Welcomes* the report of the Secretary-General on progress towards implementation of the Declaration of Commitment on HIV/AIDS;<sup>4</sup>

2. *Reaffirms its commitment* to the goals and targets contained in the Declaration of Commitment on HIV/AIDS<sup>1</sup> and the United Nations Millennium Declaration<sup>2</sup> and to their implementation;

3. *Stresses with deep concern* that the HIV/AIDS emergency, with its devastating scale and impact, requires urgent actions in all fields and at all levels;

4. *Urges* relevant United Nations organizations, as well as other relevant international organizations, to further support national efforts for implementation of the Declaration of Commitment and address the issue of the cost, availability and affordability of drugs and related technology;

<sup>3</sup> See *Official Records of the Economic and Social Council, 2003, Supplement No. 3 (E/2003/23)*, chap. II, sect. A.

<sup>4</sup> A/58/184.

5. *Urges* Member States to intensify national efforts and international cooperation in the implementation of the Declaration of Commitment in order to meet the goals and targets contained therein based on national plans, where they exist, and, in particular, where gaps have been identified in the report of the Secretary-General by, inter alia:

(a) Providing stronger and more visible leadership in response to the epidemic;

(b) Creating an environment that encourages the engagement of and partnerships with all stakeholders, including civil society, people living with HIV/AIDS, marginalized and vulnerable groups, cultural and faith-based organizations, non-governmental organizations, traditional health practitioners, the private sector, international institutions and the media;

(c) Strengthening policies and programmes for combating HIV/AIDS, including those relating to the protection and promotion of all human rights and fundamental freedoms for all, including eliminating stigmas and discrimination against people living with and/or affected by HIV/AIDS, ensuring gender equality, assisting orphans and children and expanding access to treatment, care and support;

(d) Building and scaling up a comprehensive response to achieve broad multisectoral coverage for prevention, care, treatment and support and recognizing the need to seriously address impact mitigation issues, in particular in the worst affected countries, and specifically within this context:

(i) Intensifying prevention measures, especially those directed at vulnerable groups, in particular women and young persons, bearing in mind that prevention is the mainstay of the national, regional and international response;

(ii) Expanding access to treatment, in a progressive and sustainable manner, including the prevention and treatment of opportunistic diseases and the effective use of antiretroviral medication;

(iii) Improving the provision of care and support to those infected and affected by HIV/AIDS, including orphans;

(iv) Mitigating the social and economic impact of the epidemic;

(v) Promoting access to low-cost and effective drugs and related pharmaceutical products;

(vi) Strengthening health-care systems and integrating HIV/AIDS programmes into current health services;

(vii) Strengthening HIV/AIDS surveillance and systems for evaluating programme effectiveness;

(e) Strengthening pharmaceutical policies and practices, including those applicable to generic drugs and intellectual property regimes, in order to further promote innovation and the development of domestic industries consistent with international law;

(f) Intensifying training and research initiatives or programmes to strengthen the capacities of Governments to manage the epidemic;

(g) Sharing experiences and exchanging information on key areas of intervention, such as prevention, the provision of care and support for HIV/AIDS-infected persons and the treatment of HIV/AIDS-related conditions;

(h) Addressing the human resource crisis affecting the effective implementation of comprehensive national HIV/AIDS programmes, including supporting the development of monitoring and evaluation capacities and working at the national and international levels to generate flexible solutions;

(i) Mobilizing financial resources and providing the support necessary to ensure that they are targeted effectively and absorbed quickly and deliver equitable and sustainable coverage of services, particularly to those most in need;

6. *Welcomes with appreciation* the Declaration on the Agreement on Trade-Related Aspects of Intellectual Property Rights and Public Health, adopted on 14 November 2001 at the Fourth Ministerial Conference of the World Trade Organization, held in Doha,<sup>5</sup> and the decision dated 30 August 2003 of the General Council of the World Trade Organization on the implementation of paragraph 6 of the Declaration;<sup>6</sup>

7. *Welcomes* the commitment by the World Health Organization and the Joint United Nations Programme on HIV/AIDS to work with the international community to support developing countries in achieving the target of providing antiretroviral medicines to 3 million people infected with HIV/AIDS by the end of 2005, the “3 by 5” target, recalling Commission on Human Rights resolution 2003/29 of 22 April 2003 entitled “Access to medication in the context of pandemics such as HIV/AIDS, tuberculosis and malaria”;<sup>3</sup>

8. *Urges* the mobilization of additional resources from national, bilateral, multilateral and private sources, including but not limited to additional support to the Global Fund to fight AIDS, Tuberculosis and Malaria, in order to address the growing need;

9. *Also urges* the provision of additional financial resources to the United Nations system, especially the Joint Programme’s secretariat and Co-sponsors, in order that they may intensify their support for national responses to HIV/AIDS;

10. *Emphasizes* that, with the increasing number of HIV/AIDS initiatives at the global, regional and national levels, there is a need for close coordination at all levels, including under government leadership at the national level to ensure a harmonized approach and to increase the effectiveness of the response;

11. *Encourages* the private sector to become fully engaged in the fight against HIV/AIDS, including by adopting relevant workplace non-discrimination policies;

12. *Encourages* the private sector and the pharmaceutical industry to contribute to the fight against AIDS by, inter alia, continuing to provide key AIDS pharmaceuticals that meet the standards of the World Health Organization, at the lowest possible prices;

13. *Recognizes* the importance of young men and women having access to information, education, including peer education and youth-specific HIV education, and services necessary to develop the life skills required to reduce their vulnerability to HIV infection, in full partnership with young persons, parents, families, educators and health-care providers;

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<sup>5</sup> WT/MIN(01)/DEC/2. Available from <http://docsonline.wto.org>.

<sup>6</sup> WT/L/540. Available from <http://docsonline.wto.org>.

14. *Reiterates* the need to respond urgently to the dire situation in sub-Saharan Africa and in particular the crisis conditions in the southern African region, in order to minimize the loss of institutional capacity in key national sectors and mitigate the threat of accelerating the cycle of poverty, food insecurity, instability and heightened vulnerability to HIV/AIDS;

15. *Stresses* the need for intensified action in all regions, especially the Caribbean, Eastern Europe and Asia and the Pacific;

16. *Decides* to hold a high-level meeting in 2005 to review the progress achieved in realizing the commitments set out in the Declaration of Commitment, and decides also that the scheduling, format, participation, including civil society participation, and other organizational details will be further considered during the fifty-eighth session of the General Assembly;

17. *Requests* the Secretary-General, in this regard, to submit a comprehensive and analytical report on progress achieved in realizing the commitments set out in the Declaration of Commitment, in particular those set out for 2005, with a view to identifying problems and constraints and making recommendations on action needed to make further progress;

18. *Decides* to include in the provisional agenda of its fifty-ninth session, the item entitled "Follow up to the outcome of the twenty-sixth special session: implementation of the Declaration of Commitment on HIV/AIDS".

*78th plenary meeting  
23 December 2003*