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Item 5 (a) of the provisional agenda**

Implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem: follow-up to the high-level review by the Commission on Narcotic Drugs, in view of the special session of the General Assembly on the world drug problem to be held in 2016 — demand reduction and related measures

Promoting coordination and alignment of decisions between the Commission on Narcotic Drugs and the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS

Note by the Secretariat

I. Introduction

1. The present note has been prepared pursuant to Commission on Narcotic Drugs resolution 51/14, entitled “Promoting coordination and alignment of decisions between the Commission on Narcotic Drugs and the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS”. In that resolution, the Commission called for collaboration among Member States represented both in the Commission and on the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS (UNAIDS) towards the promotion of better coordination and alignment of the HIV/AIDS response in order to scale up towards the goal of universal access to comprehensive prevention, care, treatment and support services for drug users; requested the Executive Director of the United Nations Office on Drugs and Crime (UNODC) to share relevant

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decisions of the Programme Coordinating Board with the Member States at each session of the Commission held in the first half of the year, starting with the fifty-second session; and requested UNODC to transmit relevant resolutions of the Commission each year to the Chair of the Programme Coordinating Board.

II. Promoting the sharing of decisions and resolutions among Member States represented both in the Commission on Narcotic Drugs and on the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS

2. The report on the fifty-seventh session of the Commission, held from 13 to 21 March 2014, which contained its resolutions and decisions from that session, was transmitted to the Chair of the Programme Coordinating Board on 21 May 2014. Attention was drawn particularly to the Joint Ministerial Statement of the 2014 high-level review by the Commission on Narcotic Drugs of the implementation by Member States of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem.

3. The Programme Coordinating Board, at its thirty-third meeting, held in Geneva from 17 to 19 December 2013, at its thirty-fourth meeting, held in Geneva from 1 to 3 July 2014, and at its thirty-fifth meeting, held in Geneva from 9 to 11 December 2014, recalled that all aspects of the work of UNAIDS were directed by the following guiding principles: they should be aligned with national stakeholders' priorities; they should be based on the meaningful and measurable involvement of civil society, especially people living with HIV and populations most at risk of HIV infection; they should be based on human rights and gender equality; they should be based on the best available scientific evidence and technical knowledge; they should promote comprehensive responses to AIDS that integrate prevention, treatment, care and support; and they should be based on the principle of non-discrimination.¹

4. At its thirty-third meeting, the Programme Coordinating Board discussed and arrived at decisions, recommendations and conclusions with regard to, inter alia, strategic use of antiretroviral medicines for treatment and prevention of HIV. The Board called upon member States to ensure that acceleration of access to HIV treatment, particularly for key populations,² as well as women, children and adolescents living with HIV, including addressing the barriers to treatment access, was factored into all stages of HIV and health planning, implementation, monitoring

¹ The decisions, recommendations and conclusions of the Programme Coordinating Board at its meetings are available at www.unaids.org.

² In the UNAIDS strategy for the period 2011-2015, *Getting to Zero*, key populations, or key populations at higher risk, are defined as groups of people who are more likely to be exposed to HIV or to transmit it and whose engagement is critical to a successful HIV response. In all countries, key populations include people living with HIV. In most settings, men who have sex with men, transgender people, people who inject drugs and sex workers and their clients are at higher risk of exposure to HIV than other groups. However, each country should define the specific populations that are key to their epidemic and response based on the epidemiological and social context.

and evaluation and resource mobilization, particularly with regard to the development of the investment approach and support for the roll-out of the new funding model of the Global Fund to Fight AIDS, Tuberculosis and Malaria and other funding sources. The Board also called upon member States to implement the World Health Organization (WHO) *Consolidated Guidelines on the Use of Antiretroviral Drugs for Treating and Preventing HIV Infection* with the active engagement of people living with HIV and key populations, and requested UNAIDS, inter alia, to support the implementation of those guidelines and to support countries to effectively address and remove barriers to HIV testing and treatment for key populations, women and girls.

5. At its thirty-fourth meeting, under the agenda item entitled “Update on the AIDS response in the post-2015 development agenda”, the Programme Coordinating Board, inter alia, called upon member States and UNAIDS to pursue, in line with their common vision of the “Three Zeros”, a clear commitment in the post-2015 development agenda to ending the AIDS epidemic as a public health threat and an obstacle to overall sustainable development by 2030, through evidence-based interventions, to include universal access to HIV prevention, treatment, care and support, such that AIDS no longer represents a major threat to any population or country. It also encouraged UNAIDS and member States to pursue HIV-sensitive indicators under several goal areas including, but not limited to, health, gender, education, partnership and youth, to ensure policy coherence and joined-up action to address the social, political, economic and environmental determinants of HIV, poor health, poverty and inequality (at the community, national and global levels) and strengthened inclusive accountability mechanisms to enable broad participation and ownership in implementing and monitoring the post-2015 agenda.

6. Also at its thirty-fourth meeting, under the agenda item entitled “Follow-up to the thematic segment from the thirty-third Programme Coordinating Board meeting: HIV, adolescents and youth”, the Programme Coordinating Board, inter alia, urged member States to strengthen initiatives that would increase the capacities of young women and adolescent girls to protect themselves from HIV infection, and encouraged member States and UNAIDS to follow up on decision points 8.5 and 8.9 from the twenty-fourth meeting of the Board with respect to comprehensive programming for adolescents and youth who inject drugs. It requested UNAIDS to support countries to improve the systematic and coordinated collection, dissemination and analysis of sex- and age-disaggregated data at the national and subnational levels.

7. At its thirty-fifth meeting, under the agenda item entitled “Report of the Executive Director”, the Programme Coordinating Board, inter alia, reaffirmed the UNAIDS vision of the “Three Zeros” and the strategic directions in the UNAIDS strategy for the period 2011-2015, and took note of new data and analysis that provided compelling evidence for accelerated investment and action in the next five years, based on regional variations, to enable countries to end the AIDS epidemic by 2030. It requested the Executive Director of UNAIDS to undertake a multi-stakeholder consultative process to update and extend the UNAIDS strategy for the period 2011-2015 into the fast-track period 2016-2021 to align it with General Assembly resolution 67/226, on the quadrennial comprehensive policy review of operational activities for development of the United Nations system, taking into account the Political Declaration on HIV and AIDS: Intensifying Our

Efforts to Eliminate HIV and AIDS and ongoing discussions on the post-2015 sustainable development goals, to report back on that process at the thirty-sixth meeting of the Board and to present on that basis an updated strategy and unified budget, results and accountability framework for decision at the thirty-seventh meeting of the Board.

8. Also at its thirty-fifth meeting, under the agenda item entitled “Update on the AIDS response in the post-2015 development agenda”, the Programme Coordinating Board, inter alia, encouraged member States to advocate for the decisions of the Board pertaining to the post-2015 development agenda to be fully reflected in the final documents on the post-2015 development agenda, including in the outcome document of the third International Conference on Financing for Development, as appropriate. The Board recognized that ending the AIDS epidemic by 2030 could only be achieved if no one was left behind and therefore encouraged member States to advocate for a sustainable transformative, inclusive and ambitious post-2015 development agenda. It also recognized the need to further analyse and assess the ability of the United Nations system to respond to the challenges of the post-2015 era, and emphasized the value of the experiences of UNAIDS in that regard, particularly in relation to multisectoral collaboration and issue-specific partnerships and its inclusive governance model. The Board further recognized that UNAIDS served as a useful common platform for accountability for ending the AIDS epidemic.

9. Further at its thirty-fifth meeting, under the agenda item entitled “Retargeting process for universal access”, the Programme Coordinating Board, inter alia, called upon member States to take steps to implement the national HIV prevention and treatment targets, including accelerating access to HIV treatment while ensuring equity and human rights, and using WHO guidelines as a basis to reach the “90-90-90” treatment targets. It requested UNAIDS to set targets to ensure key populations’ access to treatment and prevention services, with milestones for 2020 towards ending the AIDS epidemic by 2030, and to support countries in setting respective national targets. Under the agenda item entitled “Update on actions to reduce stigma and discrimination in all its forms”, the Board, inter alia, requested UNAIDS to support member States and civil society in accelerating efforts to ensure enabling legal and social environments where everyone, including key populations and other marginalized populations, could access HIV services.

10. At its thirty-fifth meeting, under the agenda item entitled “Next Programme Coordinating Board meetings and themes”, the Programme Coordinating Board, inter alia, agreed that the theme for its thirty-sixth meeting would be “HIV in emergency contexts” and the theme for its thirty-seventh meeting would be “Shared responsibility and global solidarity for an effective, equitable and sustainable HIV response for the post-2015 agenda: Increasing domestic funding to ensure a comprehensive and sustained HIV response, including ensuring domestic funding that respects the principle of greater involvement of people living with HIV and addresses the needs of key populations, including women and girls, and other vulnerable groups, in line with national epidemiological contexts”.

11. The Board also agreed that the theme “HIV in prisons and other closed settings” would be considered as a regular agenda item at its thirty-seventh meeting, which would be held from 26 to 28 October 2015.