Defining the Issue

1. In the Political Declaration on HIV and AIDS (2006), Governments expressed their commitment to achieving universal access to HIV prevention, treatment, care and support by 2010. Making true progress on this goal, however, requires that national AIDS responses increase their commitment and capacity to take on key barriers to such access identified in country and regional consultations. Among others, these included stigma and discrimination against people living with HIV, gender inequality, and the realization and protection of the human rights of most affected groups. In follow-up to the High-Level Meeting, UNAIDS has supported national AIDS responses to set targets towards achieving universal access by 2010. As of October 2006, 84 countries had set targets, with more planning to do so in 2007. In a November 2006 letter to UNAIDS, civil society expressed concerns about limited participation in some of these national processes.

2. The move toward universal access and the commitments made in the Declaration of Commitment (2001) and the Political Declaration (2006) represent an unprecedented framework of accountability for addressing human rights issues in the epidemic. However, to take advantage of this framework, there is urgently needed greater guidance on effective and implementable actions to promote and protect human rights in the context of HIV, the identification of useful indicators and/or strategies by which to measure human rights compliance, and greater support to people living with HIV and other members of civil society in terms of their capacity to demand their rights, monitor accountability, and be meaningfully involved. In particular, there is need for greater and more strategic engagement in the universal access framework of civil society groups working on human rights, law and gender equality.

Political Declaration (2006) human rights commitments

3. The following text broadly summarizes the human rights-related commitments expressed in the Political Declaration: "overcoming legal, regulatory or other barriers that block access to commodities and services; promoting access to HIV education and information, full protection of confidentiality and informed consent; intensifying efforts to ensure that a wide range of prevention programmes, including information, education and communication, 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; intensifying efforts to enact, strengthen or enforce, 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; developing strategies to combat stigma and social exclusion connected with the epidemic; eliminating gender inequalities, gender-based abuse and violence; increasing the capacity of women and adolescent girls to protect themselves from
the risk of HIV infection; ensuring that women can exercise their right to have control over, and decide freely and responsibly on, matters related to their sexuality; taking all necessary measures to create an enabling environment for the empowerment of women and strengthen their economic independence; reiterating the importance of the role of men and boys in achieving gender equality; eliminating all forms of discrimination, as well as all types of sexual exploitation of women, girls and boys, 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.”

4. Thus, there are significant and concrete commitments made in the Declaration. Challenge: How to best support governments and civil society in their efforts to turn the commitments in the Declaration into programmatic action at the scale necessary in order to achieve universal access by 2010 and protect human rights?

**Universal Access process: target setting**

5. The suggested universal access targets involve assessing numbers of people who will get access to prevention, treatment, care and support by 2010. There are no targets for 2010 that explicitly address human rights, gender or legal concerns. UNAIDS has urged that 2008 interim targets or process targets indicate the programmes that have been put in place that are supposed to help remove human rights or gender obstacles to achieving the final targets for 2010.

6. By the end of October 2006, 84 countries had reported that they had set universal access targets for 2010. Of the 84 countries:
   - 44 have set outcome targets for all three programmatic areas (prevention, treatment and care and support).
   - 76 have set treatment targets.
   - 76 have set outcome targets for at least one prevention intervention.
   - About two thirds of countries that set prevention targets included targets for mother to child transmission of HIV, condom distribution and appropriate knowledge among young people.
   - Less than half of the countries set targets on behaviour change and HIV testing.
   - 43 countries have set targets for coverage of orphans and vulnerable children.

7. The Political Declaration supports participatory target-setting in paragraph 51 which calls “upon Governments, national parliaments, donors, regional and sub-regional organizations, organizations of the United Nations system, the Global Fund to Fight AIDS, Tuberculosis and Malaria, civil society, people living with HIV, vulnerable groups, the private sector, communities most affected by HIV/AIDS and other stakeholders to work closely together to achieve the targets set out above, and to ensure accountability and transparency at all levels through participatory reviews of responses to HIV/AIDS.”

8. UNAIDS guidance to countries on target setting states that “the consultative process should be multi-sectoral, include full civil society participation, and lead to consensus on the targets.” In the target-setting processes to date, however, civil society organisations have reported that they are not often regarded as equal partners, and a wider range of civil society groups need to be involved. To
address these and other concerns, UNAIDS has committed support to countries to:
- Complete their target setting process
- Develop and cost robust national action plans
- Continue support to the development of one national monitoring and evaluation system, including the establishment of target baselines
- Monitor progress towards universal access at the country level, in particular effectiveness of actions taken to address obstacles
- Generate strategic information for advocacy purposes
- Establish accountability mechanisms
- Strengthen civil society engagement, particularly people living with HIV, in the entire scaling up process.

Promoting civil society engagement through the “Country Harmonisation and Alignment Tool” (CHAT)

9. Under Recommendation 4.1 of the Global Task Team (GTT) on Improving AIDS Coordination among Multilateral Institutions and International Donors (June 2005), UNAIDS was charged with developing a simple tool and guidelines that could be used by national AIDS authorities (in cooperation with UNAIDS and other agencies) to assess: (a) the participation and degree of engagement of national partners in the AIDS response, and (b) the degree of harmonization and alignment among international partners. The tool is intended to help all actors understand the network of relationships that support the national AIDS response, identifying relationships of accountability, actors with decision-making authority, and flows of information. It is envisioned as one tool to compliment other AIDS programme review resources.

10. A pilot of the draft CHAT was carried out in the latter half of 2006 in Indonesia, Nigeria, Somalia, Brazil, Botswana, Zambia and DR Congo. While the focus was on testing the tool and gathering feedback that would be useful for its subsequent revision, there were several common observations with regards to civil society participation:
- Civil society participation in all of the Three Ones is generally more limited than that of other partners.
- Organizations based in capital cities are more strongly represented than those based in regions.
- While engagement varies, there is a clear pattern: participation is strongest in national strategic planning processes, followed by monitoring and evaluation exercises. However, none of the civil society representatives in pilot countries reported being involved in decision making processes about the allocation of government funds to the national AIDS response.
- Communication flows to civil society partners needs to improve. Stronger mechanisms for engagement are needed, with more entry points for civil society representation, accompanied by access to resources that support participation.
- Representation of women, youth and marginalised populations is less than that of other groups.
- Civil society itself is not well organized and does not speak with one voice.

11. In addition to the CHAT, guidelines on the participation of civil society in the “Three Ones” are being developed by civil society groups, with support from UNAIDS, as a tool to support more direct and ongoing engagement in the
monitoring and tracking of progress towards universal access. Civil society participation, however – as envisioned by the guidelines – will need to be effectively resourced and supported, and not only from international funding sources. The UNAIDS Secretariat is also coordinating the development of a UN strategic framework to ensure civil society engagement in Universal Access implementation from 2007-2010. Cosponsors and the Global Fund are providing input according to the UNAIDS technical support division of labour. The document is expected to be finalised by the end of April, and submitted to the UNAIDS Programme Coordinating Board for their information.

Questions for discussion
a) How would the Reference Group advise UNAIDS to support human rights and HIV groups to develop means to monitor and hold governments and other duty bearers accountable for the commitments they have made in the Political Declaration (2006) particularly on human rights, law and gender?
b) How can UNAIDS and the human rights community better support countries to set interim targets the achievement of which would help to unblock obstacles to universal access relating to human rights, gender and law?
c) What should be done to engage the international and regional human rights machinery in universal access (to promote accountability for the commitments made under UNGASS, the 2006 Political Declaration, and international human rights treaties)?

Supporting documents
- Political Declaration (2006)
- Statement of the UN High Commissioner for Human Rights on World AIDS Day 2006 (“Accountability for obligations undertaken is crucial in response to HIV”)