



# INTER-PARLIAMENTARY UNION

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## PARLIAMENTARY BRIEFING AT THE 2011 UN GENERAL ASSEMBLY HIGH LEVEL MEETING ON AIDS

New York, United Nations Headquarters  
7 June 2011

### SUMMARY OF THE PROCEEDINGS

The Parliamentary Briefing was organized by the Inter-Parliamentary Union (IPU) in cooperation with the Joint United Nations Programme on HIV/AIDS (UNAIDS).

#### Opening remarks

*Mr. A.B. Johnsson, Secretary-General of the Inter-Parliamentary Union*, in his opening remarks, referred to IPU activities in the field of HIV/AIDS, focusing on its Advisory Group on HIV/AIDS. He recalled that HIV/AIDS was a health, economic and political issue for which the legislator could do much to set the right framework for enlightened policy. Under the auspices of the IPU, parliamentarians had held a series of meetings to discuss the challenges posed by HIV/AIDS and develop inter-parliamentary dialogue on the issue. They had adopted a number of documents that bound both the IPU and parliaments to continue investing their efforts in combating HIV/AIDS.

He stressed that the world had entered a new era in the HIV response that required parliamentarians to pay greater attention to shared responsibility and mutual accountability in strategic partnership with UNAIDS. He welcomed the participants and introduced the keynote speaker, Mr. Michel Sidibé, Executive Director of UNAIDS.

*Mr. M. Sidibé* made a powerful appeal for leadership from parliamentarians to create social justice and equal opportunities. He recalled that AIDS was not a debate between “us” and “them”, and stressed that the HIV response would only be successful if people living with HIV and groups most vulnerable to the infection were treated equally and enjoyed equal rights. In order for that to happen, societies should start talking about controversial issues rather than ignoring, stigmatizing and isolating persons affected by HIV/AIDS. Members of parliament had the power to influence the public discourse about the disease and lead the change to make their societies better and more just.

The United Nations had adopted a number of mechanisms to assist countries in dealing with the impact of HIV/AIDS and reflecting on how their laws treated the populations at highest risk from HIV. Mr. Sidibé called on parliamentarians to use their authority and leadership in the spheres of legislation, budgeting and oversight to help translate AIDS commitments into reality.

At the 2011 UN High Level Meeting on AIDS, UN Member States were expected to set bold new targets and commit to work towards a world without AIDS. Mr. Sidibé praised that goal as a sign of leadership and commitment, but warned that the targets would come at a time when international assistance for the HIV response had dropped for the first time since 2001. He appealed to members of parliament to advocate strongly for budget allocations for HIV/AIDS and make the relevant programmes sustainable.

### **The United Nations High Level Meeting: Review and discussion of critical issues**

*Mr. C. Benn, Director of External Relations and Partnerships The Global Fund to Fight AIDS, Malaria and Tuberculosis*, informed the participants that The Global Fund was a unique, public-private partnership and an international financing institution dedicated to attracting and disbursing additional resources to prevent and treat HIV/AIDS, tuberculosis and malaria. Thanks to its work, 7 million lives had been saved and the landscape of the three diseases had been profoundly changed.

Over the next five years, The Global Fund would strive to save up to 20 million additional lives and avert 200 million infections. That would require enhanced efficiency, increased financial resources and a more targeted allocation of grant money.

He congratulated the IPU on its strong leadership in opposing the criminalization of HIV transmission and advocating for better legal frameworks on HIV/AIDS. He thanked members of parliament for their support, which had helped increase funding available worldwide for those affected by HIV/AIDS. He called for continued action, particularly in the area of HIV prevention, in order to outstrip the progress of the epidemic.

*Ms. P. Bayr, a member of the National Council, Parliament of Austria*, noted that HIV was not just about health but also about social disparities, culture and human rights. In her view, national responses to the disease needed to focus on three groups in particular: those living with HIV, women and youth.

She said that stigma and discrimination against HIV-positive persons were major impediments to the AIDS response in every part of the world. One third of all countries still lacked legal measures to protect people living with HIV from discrimination. That was a key area in which parliamentarians should strive to exert their influence.

Ms. Bayr recalled that HIV/AIDS had become an integral part of countries' health and development frameworks. It was necessary now to strengthen those links to achieve universal access to HIV prevention, treatment, care and support, and ensure a sustainable response. She recommended that all parliaments adopt laws that supported universal access.

Regarding women, who in many countries were disproportionately affected by the disease or at greater risk, she noted that access to sexual and reproductive health had been and continued to be essential. Governments and parliaments, in her view, had the primary responsibility of providing public health services focused on the needs of families, particularly women and children.

### **Impact of legislation on HIV interventions**

*Mr. M. Kirby, Retired Judge of the High Court of Australia and a member of the Global Commission on HIV and the Law*, praised the IPU for its efforts to engage parliaments on HIV/AIDS. He stressed that the First Global Parliamentary Meeting on HIV/AIDS organized by the IPU in 2007 had been crucial in galvanizing the efforts of parliaments to combat the epidemic.

He underscored the need for parliamentarians to effectively use legislation as a tool for ensuring and sustaining universal access to HIV services. He said that currently, in the HIV response, the law was not serving the most vulnerable groups - sex workers, men who have sex with men, transgender people and injecting drug users. When parliamentarians failed to mention those most vulnerable to HIV, those populations were out of reach of essential services and effectively given a death sentence.

The role of the Global Commission on HIV and the Law was to explore the relationship between legal responses, human rights and HIV. The Commission focused on some of the most challenging legal and human rights issues in the context of HIV, including criminalization of HIV transmission, behaviours and practices such as drug use, sex work, same-sex sexual relations, and issues of prisoners, migrants, children's rights, violence against women and access to treatment. It would develop actionable, evidence-informed and human rights-based recommendations for effective HIV responses. Mr. Kirby emphasized that members of parliament were instrumental in ensuring national follow-up to the work of the Commission.

*Mr. J. McDermott, Representative, United States Congress*, underscored the need to overcome the fear of AIDS and the stigma that condemned some people to virtual isolation. He said that stigma was one of the key reasons for the distinctiveness of HIV as the virus that continued to be associated with a variety of negative views and morality judgements about perceived promiscuity, mortality and illness. The challenge was to de-stigmatize HIV in the public consciousness in order to improve access to services. In many societies, de-stigmatization needed to start in the workplace and in medical settings.

He would like to see more sources of funding for HIV/AIDS programmes or, at the very least, to keep the programmes running at their current level. In developing countries, money should also be used to build better infrastructure and to train more health professionals, such as nurses, health care practitioners and others. Those health professionals could perform many tasks and provide certain kinds of care at a lower cost than doctors. Their potential, however, often remained unexploited because of restrictive laws or professional regulations, which had so far been largely overlooked.

Referring to treatment, Mr. McDermott said that despite the relatively early emergence of HIV treatment, access to it still remained problematic in many countries. He stressed that the Trade-Related Aspects of Intellectual Property Rights (TRIPS) Agreement was crucial for achieving universal access to HIV treatment but warned that there was mounting pressure to replace it with the TRIPS Plus provisions, which imposed more restrictive conditions on national patent laws. He appealed to members of parliament to get involved and carefully scrutinize the trade agreements that their governments negotiated.

## **Discussion and conclusions**

The discussion that followed each panel highlighted the following key themes and recommendations:

- 1) Parliaments are essential to ensuring that there is sound overall legislation for dealing with HIV/AIDS. The IPU should support the work of relevant committees and networks to sensitize and raise awareness in parliament about HIV/AIDS. The IPU and its partners should also develop tools to help parliaments examine the impact of laws on HIV/AIDS at the national level.
- 2) In many countries, preventive measures are targeted to the general population instead of the key affected populations. As a result, a lot of money is wasted and HIV infections continue at unsustainable rates. Members of parliament must press governments to make difficult decisions, shift funding to those who need them and reduce vulnerability to infection.

- 3) Gender inequalities make women and girls particularly vulnerable to HIV and the impact of AIDS. Greater efforts should therefore be made to link HIV/AIDS to reproductive health education, services and rights. Laws and policies that prevent and punish violence against women, including harmful traditional practices, and effective implementation, are crucial in this context.
- 4) Parliamentarians should fight stigma and discrimination not only as a matter of human rights but also as a matter of effective policy-making at both the national and local levels. They should get to know the profile of the epidemic in their countries and constituencies, provide leadership and do their utmost to protect those they represent. Peer education is very important in this context and should be encouraged by members of parliament.
- 5) Parliamentarians should not underestimate their power to oversee the government. Closer scrutiny and better monitoring of domestic and international funds for HIV programmes, including those run by non-governmental organizations, are urgently needed. Parliaments should also hold governments to account regarding the commitments made at the UN High Level Meeting and other forums.
- 6) Making HIV drugs affordable is instrumental in achieving universal access to HIV treatment. There should be joint action by the IPU and parliaments to support those parliaments that are inserting TRIPS flexibilities into their national legislation.
- 7) Parliamentarians should put evidence-based approaches ahead of their personal moral, religious and cultural beliefs when discussing HIV/AIDS and the related laws. HIV/AIDS should be confronted as a public health rather than a cultural problem, and responses should be devised accordingly. Like constitutional law, long-established moral codes should be interpreted in the light of contemporary social realities.
- 8) There should be greater coordination between donor and funding agencies and institutions in recipient countries, including parliaments. Donors should be encouraged to increase technical support to low- and middle-income countries to enable them to implement the grants in the most efficient manner. In this context, it is important that parliaments either participate in the Country Coordinating Mechanisms or receive regular reports about their work.
- 9) The IPU should continue to facilitate a sharing of good practices on issues such as criminalization of HIV transmission, travel restrictions on people living with HIV, and more generally, on the impact of punitive and discriminatory laws on the HIV response. Some parliaments have adopted strategic plans to combat HIV/AIDS, which could be examined and applied more broadly.
- 10) Parliamentarians should educate the media to garner more support for their legislative actions and involve them in parliamentary activities on HIV. They should also use public meetings and newsletters to inform constituents and community leaders about the commitments the government or party has made to achieve universal access to HIV prevention, treatment, care and support.

*The Secretary General of the Inter-Parliamentary Union thanked the participants for their contribution to the Parliamentary Briefing and declared the meeting closed.*