STATEMENT
By: Joint United Nations Programme on HIV/AIDS (UNAIDS)
Date: 1 - 2 October 2018
Place: Geneva, Palais des Nations
Panel 2: Families, Sexual and Reproductive health over the life course.

Madame Chair, Excellencies, Distinguished Delegates and Partners,

UNAIDS appreciates the opportunity to address the linkages between HIV in relation to the theme of this panel: families, sexual and reproductive health over the life course.

The ICPD Programme of Action has put international human rights principles, including sexual and reproductive health and rights, autonomy, non-discrimination, equality, participation, empowerment, meaningful decision-making, and accountability at the core of the Agenda. Today, almost 25 years later, the Agenda and especially the unfinished ICPD Agenda, is still relevant for many countries.

Despite powerful commitments by member states, including in the outcomes of the ICPD subsequent regional reviews, the 2030 Sustainable Development Goals and the 2016 High Level Political Declaration on HIV and AIDS, we need to recognize that there are still alarming trends.

The Global AIDS update 2018 highlights the following for the Eastern Europe and Central Asia Region:

- The HIV epidemic in this region has grown by 30% since 2010 and continues to grow, with many countries not on track to reach key global targets by the end of 2020.

- The report also shows that key populations, including injecting drug users, men who have sex with men, migrants, prisoners, sex workers and transgender people, are not being considered enough in HIV programming. Key populations and their sexual partners account for 97% of new HIV infections in the region, where one third of new HIV infections are among people who inject drugs.

- Stigma and discrimination against people living with HIV and key populations remain the biggest drivers of HIV infection in the region. It prevents them from accessing quality health information and services, including on sexual and reproductive health, HIV and STIs.

Reversing these trends requires increased prevention, testing and treatment efforts, as well as fighting growing stigma and discrimination against people living with HIV and key populations.

Gaps in sexual and reproductive health and rights take an enormous toll on individuals, families, communities and economies around the world. Addressing these gaps requires a holistic, integrated and people-centred approach that includes the right of all individuals to make
decisions about their bodies and lives—free of stigma, discrimination and coercion—and to have access to essential sexual and reproductive health interventions.

When the full range of sexual and reproductive health and rights services are integrated, it also improves access to services for HIV-related illnesses, such as TB and cervical cancer, as well as for HIV prevention and treatment services.

Madame Chair,

If we want to keep the promise of Cairo alive, we need to prioritize our focus on women and girls, young people, key populations and other vulnerable groups that are still being left behind.

We need to make sure that the ICPD principles are translated into laws, policies, programmes, and practices. And that we hold each other accountable.

UNAIDS remains committed to support all Member States in the UNECE region to enhance their efforts to realize the sexual and reproductive health and rights of all.

Thank you.