

Joint statement on Item 5 -- Oral report on UNICEF follow-up to the recommendations and decisions of the forty-seventh and forty-eighth meetings and two special sessions of the Joint United Nations Programme on HIV/AIDS Programme Coordinating Board

Thank you, Mr. President.

I am pleased to deliver this statement on behalf of Austria, Japan, Australia, Norway, Portugal, Canada, Luxembourg, Ireland, Switzerland, Germany, Iceland, the United States, Sweden, Belgium, France, Finland, the United Kingdom, the Kingdom of the Netherlands, Monaco and my own country, Estonia. We welcome the report on UNICEF's follow-up to recommendations and decisions, and appreciate the opportunity to focus on the impact of HIV and AIDS on children, adolescents and mothers in particular. We thank UNICEF for their report, which clearly outlines the critical situation regarding HIV infections in these groups.

Despite progress made towards the elimination of mother-to-child transmission of HIV, the figure of 150,000 new infections in children aged 0 to 14 years in 2020 alone, highlights why a stronger focus on children is necessary. The stagnation of global coverage of antiretroviral treatment (ART) access for pregnant women means children continue to be exposed to infection. Compounding this, only 54% of children living with HIV are accessing ART, well below the figure for adults. The report also highlights the challenging situation in adolescents, despite progress over the last decade, with 150,000 new infections in adolescents aged 10-19 worldwide. We need to make significant progress if we are to ensure that young people have the opportunity to live AIDS-free.

In addressing this challenging situation, we see a number of opportunities as well as challenges ahead:

First, the new Global AIDS strategy 2021-2026 sets out a clear vision to tackle inequalities that continue to drive the epidemic. We acknowledge the contribution made by UNICEF in the development of the strategy and the resultant increased focus on children, with a specific result area on paediatric treatment. This focus on children is vital to make the progress needed over the next 5 years. We welcome UNICEF's co-leadership on this and the strategy's result area on young people. We look forward to seeing the improved results that this heightened focus brings.

Second, we need to increase investments to support the health of adolescent girls and young women. New HIV infections in adolescents remain at an alarming level. Adolescent girls and young women are particularly affected. In sub-Saharan Africa, six in seven new HIV infections among adolescents aged 15 to 19 years are among girls and young women, indicating the need for both young women and men to have access to comprehensive sexuality education and integrated sexual and reproductive health services. Violence against women and girls as well as key populations exacerbates vulnerability to HIV. We need to urgently address this issue, including discriminatory norms, rape stigmatisation, inequities, and the social, economic, and environmental determinants of health that underpin it if we are to successfully tackle the HIV epidemic. This also means working with boys and men to make them agents of change. Furthermore, we need to address the multiple needs of adolescent girls and young women by scaling up combination prevention packages that include Comprehensive Sexuality Education (in and out of school) and bring about transformative change.

To this end, we welcome UNICEF's new tool kit to support high-quality combination prevention programming for adolescent girls and young women and their work to provide an

integrated package of primary health care services that addresses their holistic wellbeing needs.

Third, the Covid-19 pandemic continues to impact the HIV response including for children, adolescents and women. Disruption to health services has negatively impacted HIV testing and referrals for diagnosis and treatment. The report highlights that transmission of HIV from mothers to their children has increased as a result. We welcome the report's focus on the importance of resilient, high-quality health systems. These are vital to provide integrated services in HIV, SRHR, immunisation, antenatal care and child and adolescent health. We urge greater integration of HIV prevention, testing, diagnosis, treatment, care, and support into Universal Health Coverage, health and social protection systems programmes at the country level; and that they embed a human rights approach.

In closing, we wish to thank UNICEF as a critical co-sponsor and owner of the UNAIDS program and all those who worked to achieve a number of critical milestones in 2021, including the new Global AIDS strategy, the High-Level Declaration on HIV and AIDS as well as a new ECOSOC resolution on the Joint United Nations Programme on HIV/AIDS. In 2022, we must translate the promises in these documents into actions to reach our collective ambition to end AIDS as a public health threat by 2030. We recommend UNICEF to ensure the allocation of sufficient financial and human resources to implement the activities under its responsibilities contained in the Unified Budget, Results, and Accountability Framework of the Joint United Nations Programme on HIV/AIDS and report on this in the following Board.

Thank you.