MENA Civil Society Networks and Organizations Statement for the Multistakeholder Hearing and Political Declaration

Today the opportunity presents itself for the world to come together and commit to ending AIDS and advance the HIV response. This chance comes during a time when the world was burdened by Covid19, where the weaknesses in our systems were exposed, inequalities further expanded the gaps between us, and our vulnerable populations became more vulnerable and marginalized.

This year coming on the 40th year since the discovery of AIDS, we remember all 33 million people who have died of HIV/AIDS complications and continue to die yearly. We have seen that with political will, research, funding and investment, a vaccine for Covid19 became available within months with the fastest approval rate and planned roll out, we ask that more resources be available to HIV/AIDS.

We the people, living with HIV and affected by HIV in the Middle East and North Africa;

We the key populations, Men who have sex with men, Transgender women and men, LGBTIQ+, sex workers, people who use drugs, women and girls in all their diversity, refugees, migrants and mobile populations, and people in prisons and closed settings and their partners in the Middle East and North Africa;

We the civil society, activists, advocacy groups, Community Groups, NGOs, Coalition, Regional Networks, professional associations, lawyers, medical staff, nurses, service providers, mental health experts, social workers, grant facilitators, journalists, communications experts and community leaders in the Middle East and North Africa;

We present this statement with what we believe is imperative to ensure a fair and equitable HIV/AIDS response within the new Political Declaration:

- We are not vulnerable or marginalized, we are not numbers or statistics, we are people. Plan and engage with us on the basis of human rights. State all key populations by their denominations in the declaration so that we are recognized, addressed and protected.
- Repeal laws that criminalize HIV non-disclosure, exposure, and transmission, consensual same- sex behavior, gender expression, drug use and possession, and sex work. Address the needs of senior key populations, their wellbeing, health, sexual rights, mental health and security.

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- Address long term HIV exposure, the effects of long term treatment adherence, treatment shipping and storage safety, resistant strains of HIV and other Sexually transmitted infections by supporting investment in science and innovation.
- Address inequalities in service provision and programs which have hindered time and time the effectiveness of programs including and not limited to HIV and STI testing, treatment, sexual and reproductive health and rights, TB services, comorbidities and opportunistic diseases, Harm Reduction and drug dependency Programs, hormone replacement therapy, mental health and other life saving programs.
- Scale up access and adherence to treatment for communities to ensure ending stockouts which increase the risk of developing AIDS and resistance.
- Ensure access to treatment in countries torn by war and conflict and that the treatments are part of the humanitarian response.
- Address stigma and discrimination and inequalities in the healthcare system, service delivery, workplace, financial, legal and public institutions and travel and work restrictions.
- Support the implementation of Universal Health Coverage to ensure everyone has access to affordable, equitable, quality services.
- Scale up the interventions aimed at eliminating vertical transmission to ensure no new infections among newborns.
- Remove barriers to services for youth, specifically age of consent for prevention, education, Sexual and Reproductive Health and Rights.
- Address the issues of gender-based violence highlighting the interlinkage of GBV and HIV, access to services including protection, socio-economical programs, support and empowerment of young women and girls.
- Scale up innovative prevention programs with focus on HIV self test, community testing, Prep and Pep, male and female condoms, as well as access to counseling and awareness programs specifically for key populations.
- Ensure PLHIV are prioritized in Covid19 vaccinations and that HIV services are not deprioritized.

- Ensuring pandemic preparedness will ensure HIV services continue and health systems will be able to respond to both pandemic and epidemic.
- Make resources available especially for research around cure, HIV vaccination and long acting

ARVs. Support domestic financing for community health systems as an important part of the national response and the overall targets of Universal Health Coverage.

- Encourage local and regional ARV manufacturing by ensuring access to treatment intellectual properties
- Support PLHIV and community leadership by ensuring PLHIV are at the heart of the response, decision making and leadership, Nothing for Us without Us.























































































