The proposed Sustainable Development Goal on Health (Goal 3) includes a target specific to ending AIDS by 2030. As communities representing people living with and affected by HIV in the Asia-Pacific Regional Civil Society Engagement Mechanism, we believe that ending the AIDS epidemic is only possible with a holistic approach that truly leaves no one behind.

Specific key populations and vulnerable communities affected by HIV face social, economic and gender injustices. These groups include: sex workers, people who use drugs, gay men and other men who have sex with men (MSM), transgender people, people living with HIV, key affected women and girls, migrants, children, adolescent and young key populations.

HIV is not just a health issue. It has become a virus that requires more than drugs in order to be treated. In the Asia-Pacific region, addressing the HIV epidemic requires challenging inequalities and inequities, criminalization, stigma and discrimination. It also entails recognizing the intersectionality of the human rights, gender, sexuality and development dimensions of the epidemic and addressing the social, economic and political barriers that impede the implementation of a comprehensive, integrated and sustainable HIV response.

Human rights and dignity, including rights to health and development, should be fully ensured for our communities. And in the context of financing for development, there should be full investment in strengthening community systems to fight and overcome HIV/AIDS by 2030.

We call on Member States to:

1. Review and repeal discriminatory and punitive laws and practices that violate the rights and increase the vulnerabilities of men who have sex with men, transgender people, sex workers, people who use drugs, migrants and those living with HIV.

2. Address the economic, and social barriers to access to health services, including sexual and reproductive health services, especially for key populations.

3. Prevent all forms of gender-based violence (GBV) and establish functional redress mechanisms.

4. Develop a more sustainable mechanism to ensure the availability, affordability and accessibility of treatment and diagnostics for HIV and co-infections in low and middle-income countries, including addressing Intellectual Property-related barriers.

5. Scale up rights-based, community-led and gender-responsive HIV prevention, treatment, care and support interventions, inclusive of migrants, people of sexual diversity, and young people from key populations.

6. We also call on UN agencies to facilitate opening up of spaces for the meaningful engagement of civil society, including from people living with and affected by HIV in national, regional and global Post-2015 platforms and discussions.

Distinguished Delegates, the world we want is a world that does not leave people living with and affected by HIV, behind.
Thank you.

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