Introduction

- The Global AIDS response continued to register progress towards the targets and commitments in the 2021 Political Declaration on HIV/AIDS: An estimated 1.3 million new HIV infections in 2022 were the fewest in decades, with the declines especially strong in regions with the highest HIV burdens. The number of AIDS-related deaths reduced by 69% since their peak in 2004. Several countries in sub-Saharan Africa have already achieved the 95–95–95 targets, and many others are close to doing so. Globally, over 29.8 million of the 39 million people living with HIV globally are receiving life-saving treatment, and almost three-quarters (71%) of people living with HIV in 2022 had suppressed viral loads. The global target of 35 million people on HIV treatment by 2025 is within reach.

- Threats towards the goal of Ending AIDS as a Public Health threat by 2030 still exist. The surge in conservatism in some parts of the world has resulted in a strong pushback against efforts to promote and protect human rights of key and vulnerable populations, and ensure gender equality. The pushback against gender and human rights resulted in increased vulnerability to HIV and limited access to lifesaving HIV services.

- Multiple crises facing the world affected availability of resources for the Global AIDS response. In 2022, US$ 20.8 billion was available for HIV programmes in low- and middle-income countries—2.6% less than in 2021 and well short of the US$ 29.3 billion estimated to be needed by 2025. In addition, UNAIDS estimates that in 2022 there was a 90% shortfall in funding for HIV prevention among key populations most affected by HIV, including men who have sex with men, sex workers and people who inject drugs. Strict prioritization of the limited resources available allows the Joint United Nations Programme on HIV/AIDS to contribute to the aforementioned progress in the Global AIDS response in a constrained resource environment.

1. The HIV response and the Sustainable Development Goals

- At the halfway point to 2030, only 12% of the SDG targets are on track, progress on 50% is weak and insufficient and more than 30 percent of the SDGs have stalled or reversed. Progress has been made towards SDG 3.3, which includes ending AIDS - and has resulted in an HIV response that is generating effects
that go beyond the public health realm and are contributing to progress towards other SDGs.

• The gains being made, and the health and community systems being strengthened, are triggering extensive health, social, economic, and development benefits. Successful HIV programmes are supporting, as well as increasing, the incomes of households affected by HIV, including improvements in wealth, labour market outcomes (SDG 8), health outcomes (SDG 3), and schooling (SDG 4).

• In countries where HIV is highly prevalent, particularly in eastern and southern Africa, this could add up to a cumulative, poverty-reducing effect (SDG 1). By protecting livelihoods, successful HIV programmes are also helping safeguard food security (SDG 2) and people’s ability to financially support the schooling of their children (SDG 4).

Key policy messages and recommendations

• The path to ending AIDS is the SDG road map. The AIDS response is the embodiment of UN reform and One UN, and a prime example of what a “whole of society” approach means.

• Ending AIDS as a Public Health threat requires collaboration – South and North, governments and communities, and all UN Member States working together. And it requires bold leadership. We ask all UN Member States to deliver on commitments in the 2021 Political Declaration on HIV/AIDS – and note that doing so also drives the achievement of the SDGs broadly while bolstering efforts on gender equality, human rights and poverty reduction.

2. Sustainability of the HIV response

• As countries work to reach the goal of ending AIDS as a public health threat by 2030, planning is urgently needed to protect and build on the HIV gains made to date, increase efforts to reach people most affected by HIV, and to sustain the HIV response into the future.

• Sustainability to 2030 and beyond will require strong political leadership across multiple sectors, and the active engagement of people living with HIV and of key and vulnerable populations. Resources will need to be mobilized from both domestic and international sources, and flexibility and resilience will be required
as epidemics evolve, and shifts occur in changing economic, political and social contexts.

- UNAIDS has developed an HIV sustainability framework focused on political, programmatic, and financial sustainability, which includes transformations in policy, programmes and systems to sustain the HIV response beyond 2030. To ensure success in sustaining the HIV response, UNAIDS is supporting all stakeholders on long-term planning. Sustaining the HIV response will have positive impacts on other areas of development including broader health systems, gender, human rights and poverty.

**Key policy messages & recommendations**

- Scaling up and sustaining HIV treatment has transformed the health and life course of people living with HIV, contributing to broader improvements in health, education, labour market, and wealth outcomes. The positive economic returns on investment in HIV treatment are well-established, and as a recent analysis by The Economist highlights, there is a ‘Triple Dividend’ of health, social and economic gains from investing in the HIV response in Africa.

- Transformative actions are needed, starting immediately, to reconfigure the HIV response to ensure durability and resilience. Every step forward should be prioritised to ensure the greatest benefit, maximising gains, and ensuring that impacts are enduring, including considering emerging crises that have potential to disrupt the HIV response, and that give rise to humanitarian emergencies.