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DRAFT STRATEGY NOTE: ACTION AREA 2

HIV, HEALTH AND DEVELOPMENT

2016-2021

Action area 2: Promoting effective and inclusive governance

Priority 2.1: Enabling legal, policy and regulatory environments for HIV and health

Legal, policy and regulatory environments continue to undermine the response to the HIV epidemic and other health responses in many countries. In particular, overly broad criminalization of HIV transmission, laws that criminalize sex work, drug use and sex between men and laws and policies that limit access to affordable medicines or that fail to ensure equality for women and protect children can all increase HIV vulnerability and act as barriers to accessing HIV prevention and treatment.¹ Such laws and policies also reinforce stigma and discrimination that increase inequalities and exclusion. All UN Member States have committed to strengthening laws to eliminate discrimination against people living with and at highest risk for HIV and to ensure their full enjoyment of human rights and access to health care and legal protection.²

Key UNDP service offerings include policy and programme support on:

- Working with government, civil society and UN partners to implement the findings and recommendations of the Global Commission on HIV and the Law;
- Strengthening legal, policy and regulatory frameworks for increasing access to HIV treatment and other health technologies, in line with the public health objectives of the TRIPS agreement;
- Access to justice for HIV and health, including a focus on inclusive political processes, judicial sensitization and civic engagement;
- Strengthening the evidence base on legal, policy and regulatory frameworks for HIV and health;
- Integrating human rights and addressing legal barriers in Global Fund policies and programmes; and

¹ UNDP, 2012. The Global Commission on HIV and the Law. Risks, Rights & Health.

² United Nations. 2001. Declaration of Commitment, UN General Assembly Special Session on HIV/AIDS.

- Responding to HIV-related human rights crises, in line with Human Rights Up Front initiative of the United Nations.

In July 2012, the UNDP-led Global Commission on HIV and the Law released its landmark report “HIV and the Law: Risks, Rights & Health”, presenting a coherent and compelling evidence base on HIV, human rights and legal issues. UNDP and UN partners are supporting governments and civil society to follow up on the work of the Global Commission in 86 countries covering all regions. This includes supporting countries to create enabling legal environments for effective HIV responses through law review, national dialogues on law reform, judicial and parliamentary sensitization and access to justice programming. UNDP has also developed tools to support Commission follow up, such as compendia of judgments for judicial sensitization, guidance on conducting legal environment assessments and national dialogues for law reform. UNDP is also working with partners to support the ratification of the Arab Convention on HIV Prevention and Protection of the Rights of People Living with HIV, adopted in March 2012 by the Arab Parliament. Once ratified by countries, it will provide a legal basis for the protection and promotion of the rights of people living with and affected by HIV.

The Access and Delivery Partnership, led by UNDP with PATH and the Special Programme for Research and Training in Tropical Diseases based at WHO, aims to develop new approaches to expand much needed research and development for new health technologies for TB, malaria and NTDs and to support countries in expanding delivery to and access for poor patients. This includes building national capacities for enabling legal, policy and regulatory frameworks for the introduction of new health technologies for poor patients in low- and middle-income countries. In Tanzania, the Access and Delivery partnership is building national capacity and promoting policy coherence to protect public health and stimulate local pharmaceutical production, in line with the initiatives of the East African Community and the African Union’s Pharmaceutical Manufacturing Plan for Africa.

Priority 2.2: Strengthening governance to address NCDs and tobacco control

NCDs contribute to economic losses and trap millions of people in poverty. This burden could be significantly reduced if health systems responded more effectively and equitably to the needs of people with NCDs and if public policies in sectors outside health addressed shared risk factors - such as tobacco use, unhealthy diet, physical inactivity, and the harmful use of alcohol – more effectively. In the UN Political Declaration on NCDs of September 2011, Member States committed to establishing and strengthening multisectoral national policies and plans for the prevention and control of NCDs and to consider the development of national targets and indicators based on national situations.³ Many countries with high burdens of HIV also face burgeoning epidemics of NCDs and significant opportunities exist for closer integration of HIV and NCD programming.

Tobacco use is a major global public health threat, killing nearly six million people a year. Nearly 80% of the more than one billion smokers worldwide live in low- and middle-income countries, where the burden of tobacco-related illness and death is greatest. The WHO Framework Convention on Tobacco Control (FCTC), which came into effect in 2005, is the first global public health treaty. There are now 180 parties to the FCTC. UNDP leads on the

³ United Nations, 2011. Political Declaration of the High-Level meeting of the General Assembly on the Prevention and Control of Non-communicable diseases. A/RES/66/2, 19 September 2011.

implementation of Article 5 of the FCTC, which addresses national governance and policy issues.⁴

Key UNDP service offerings include policy and programme support on:

- Multisectoral, whole of government responses to NCDs and tobacco control, including the development of NCD investment cases and the integration of NCDs and tobacco control in national and local development plans and strategies;
- Strengthening the evidence base on legislative, executive, administrative and other measures to reduce tobacco consumption, nicotine addiction and exposure to tobacco smoke;
- Strengthening governance of NCD and tobacco control responses including support to national coordinating mechanisms or focal points for tobacco control; and
- Leveraging lessons from the HIV response for scaling up responses to NCDs.

In 2013, UNDP published a pioneering policy report on addressing the Social Determinants of NCDs. Highlighting lessons from the AIDS response for other complex health changes, the report provides analysis and good practice examples of action outside the health sector to address the social determinants of NCDs.

In China - the biggest producer and consumer of tobacco in the world - UNDP and WHO are working together on policy research to assist China in addressing tobacco as a development issue by (a) updating knowledge on current impacts on socioeconomic development and, more broadly, human development; (b) assessing inequities within these impacts; (c) estimating projected impacts under different scenarios of future tobacco use and (d) modelling the impact of different policy options to aid in prioritization of resources. This work will feed into China's new National Anti-Tobacco Plan.

Priority 2.3: Sustainable financing for HIV and health

According to UNAIDS, despite significant increases in domestic financing for HIV in the last few years, many countries with significant HIV prevalence remain heavily dependent on external funding sources.⁵ To improve sustainability of national HIV responses, including long-term commitments to HIV treatment, a combination of approaches is needed. In some countries, economic growth offers the potential for increased domestic funding in order to reach commitments to higher health spending as a proportion of GDP. At the same time, improvements in programming efficiency and reallocation of resources for greater impact can be undertaken, consistent with the UNAIDS Investment Framework.⁶ This includes strategic integration of HIV and other services, innovative financing and co-financing approaches, strengthened governance and synergies with other development objectives.

Key UNDP service offerings include policy and programme support on:

- Improving allocative efficiencies for HIV and health;

⁴ UNDP, FCTC, 2014. Development Planning and Tobacco Control: Integrating the WHO Framework Convention on Tobacco Control into UN and National Development Planning Instruments.

⁵ UNAIDS, 2013. UNAIDS report on the global AIDS epidemic.

⁶ Schwartländer B et al. Towards an improved investment approach for an effective response to HIV/AIDS. The Lancet Volume 377 No 9782 p2031-2041, June 2011.

- Approaches to sustainable HIV financing, including developing investment strategies and national investment cases using a rights-based approach;
- Co-financing approaches for HIV and health.

UNDP, the World Bank and the Global Fund supported investment approaches to national AIDS response in Armenia, Belarus, Kazakhstan, Kyrgyzstan, Moldova, Tajikistan, and Ukraine. Specifically, HIV allocative efficiency studies were carried out that help to identify the optimal mix of programmes to maximize health impact. The analyses led to recommendations that place greater emphasis on HIV prevention and services for key populations including female sex workers, men who have sex with men and people who inject drugs, in addition to HIV treatment scale-up. As part of this initiative, UNDP has also provided the countries with a comprehensive review of legislative and regulatory frameworks for access to affordable, quality antiretroviral medicines. UNDP is also providing policy advice on achieving value for money in ARV procurement.