

UNGASS in SHARP Focus Sexual Health and Rights and the 2006 UNGASS Review

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Editor's note: This is the final issue of UNGASS in SHARP Focus. UNGASS in SHARP Focus is an initiative of the OSI/SHARP (sexual health and rights project). Its purpose has been to provide information about key sexual health and rights issues and activities arising in the process of the UNGASS review. It was directed both toward those attending the special session and those who are not. Six issues, in total, have been released. The first two were issued prior to the review, in order to provide background information about the status of negotiations and planned activities during the UNGASS. Three issues were released during the UNGASS (May 31 – June 2), at the end of each day. For more information please contact Susana T. Fried at susana.fried@gmail.com or Rachel Thomas, OSI/SHARP at rthomas@sorosny.org.

We would like to take this opportunity to offer our profound thanks to the many HIV/AIDS activists who committed their time, energy and passion to these proceedings. While many activists and commentators have expressed their dissatisfaction with the final outcome, there is no question that the process and the document was immeasurably advanced through broad, committed, thoughtful, regionally and sectorally diverse civil society participation.

Issue 6, 5 June 2006

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1. Summary and wrap-up: sexual health and rights at the UNGASS review

It is a classic case of having to decide whether the glass is half empty or half full. In articles and press releases over the weekend and on Monday, 5 June 2006, a variety of perspectives have been articulated about the final Political Declaration – including a range of views relating to sexual health and rights. The negotiations were especially divisive at moments, and resulted in a number of civil society protesters being ejected from the UN building (they were later allowed to re-enter, at the urging of the UN Secretary General), and others being arrested at a protest in front of the US Mission to the UN (see previous issues of UNGASS in SHARP Focus for details). Not only were many civil society participants dismayed at efforts to prevent them from even observing (let alone having input into) the negotiations in informal sessions; many governments as well registered their disagreement with an process of negotiations that was far from transparent, led by Thailand and Barbados. The process seemed to improve in the final days of negotiations as higher level members of delegations arrived from their capitals.

Among the most balanced perspectives was that offered by the Progressive Youth Caucus (see full text below, p. 11). They praised the inclusion of progressive language on condoms, youth friendly health services, evidence based prevention strategies and women's full enjoyment of human rights. However, they noted the absence of concrete commitments, particularly around comprehensive sexuality education. They also eloquently questioned the euphemistic use of the term "vulnerable groups," comment that it should be changed to "discriminated populations", because while some populations in society are bearing a heavier burden of the HIV/AIDS pandemic, it does not mean that they are vulnerable in themselves as human beings. The high infection rates among young people (particularly young women), men who have sex with men, sex workers and injecting drug users, should be blamed on the lack of acceptance, support, and respect for their experiences and identities that societies in this world still reproduce. The problem is not the people, it's the discriminatory systems they are forced to either exist within or live outside of" (Progressive Youth Caucus).

Some news articles found the story to be in the lack of concrete commitments made by governments - a failure also decried by many civil society activists. For example, the Houston Chronicle reported that "World leaders resisted setting exact financial targets Friday for the fight against AIDS, drawing criticism from activists who said rich nations are too worried about having to pay the bill." (at <http://www.chron.com/disp/story.mpl/ap/world/3923383.html>). The article further noted that the resistance to setting ambitious financial targets came mostly from the major donor countries. Moreover, in speeches during the High Level Segment, many recipient countries emphasized the importance of greater, more sustained and more predictable funding for HIV/AIDS prevention, care, treatment and support (see, for example, statements from Nigeria and Brazil, included in full below).

The Houston Chronicle noted that "[r]ights groups and some delegations were also dismayed that a declaration capping the U.N. conference on AIDS failed to mention the people most at risk for the virus, including prostitutes, gay men and intravenous drug users." Even the UN Secretary General, Kofi Annan emphasized the serious nature of the failure to specify the particular groups at risk, in an article published in BBC News, noting "Annan also criticized nations for not addressing high-risk groups -- such as IDUs, commercial sex workers and men who have sex with men -- more specifically in the declaration. Annan said, 'You cannot deal with a problem without confronting the issue of the most vulnerable who need assistance most. It's counterproductive'" (BBC News, 6/3 at http://news.bbc.co.uk/2/hi/in_depth/5039948.stm).

Some countries and blocs, including the European Union and the Rio group stressed the importance of anchoring HIV/AIDS initiative in human rights approaches, including emphasizing efforts to counter stigma and discrimination, especially among "vulnerable" groups, and promoting and protecting the human rights of women and girls. In this context, Brazil proclaimed that it is crucial to recognize the importance of intellectual property rights, but "no rights of a commercial nature can be upheld to the detriment of the right to life." (Statement by H.E. Mr. Celso AMORIM, Minister for Foreign Affairs, Brazil at www.un.org/webcast/ga/aids/2006/parallesegmentA-02june06.html)

While many activists arrived at the meeting with great optimism as a result of a strong statement crafted by the African Union at the Abuja regional preparatory meeting, these hopes were dashed early on, as the African group (led by Gabon) quickly backtracked from its strong and progressive commitments. Only Nigeria sought to distance itself from the African group, reiterating its commitment to the Abuja declaration in its statement at the final plenary. The Mail & Guardian noted the sense of betrayal among a number of African civil society networks. According to the Mail & Guardian, "Sisonke Msimang, representing [African Civil Society Coalition on AIDS], said the Africa group, headed by Gabon, was flagrantly violating the "common position" and had proposed that any reference to vulnerable groups, or the empowerment of girls, be removed from the final UNGASS declaration...."Vulnerable groups" is code for gays, sex workers and intravenous drug users. One of the most contentious debates has been over these issues, and rights for women and girls, as conservative countries say they do not want to give legitimacy to groups who violate national cultural or religious beliefs." (Belinda Beresford, Mail & Guardian, 2 June 2006)

Some groups have struggled to find a silver lining to emerge from a gloomy three days. An article by Lawrence K. Altman and Elisabeth Rosenthal on 3 June 2006 in the New York Times noted that the political declaration contained:

strong commitments to bolster the rights of women and girls so they can protect themselves from infection with H.I.V., the virus that causes AIDS. The document also acknowledges the role of men in spreading the disease and their responsibility to respect women....The declaration calls on countries to use scientifically documented prevention strategies, including condoms; to make clean needles accessible to drug users; and to take steps to provide universal access to prevention programs, care and antiretroviral drugs.... It includes politically charged terms like "condoms" and "vulnerable groups," though those groups are not specified. Many advocates have urged the United Nations to acknowledge frankly that some of today's fastest-growing H.I.V. epidemics are among intravenous drug users, prostitutes and gay men.

The Washington Post noted that some advocates appreciated the effort to acknowledge “links between AIDS and gender inequality, an assertion that women should have control over their own reproductive health, and language condemning “harmful traditional and customary practices, abuse, rape and other forms of sexual violence.” ‘From that perspective we feel that we have gained ground,’ said Zonny Woods, a Canadian woman with the International Women's Health Coalition, in New York. ‘In that regard I would say it is a success.’” (David Brown, Washington Post Staff Writer, Saturday, June 3, 2006; A03).

Still, despite some efforts to see forward motion in the document and in the process, civil society organizations, as a group, offered a fairly scathing review. A press release issued immediately following circulation of the political declaration decried the proceedings as “death by diplomacy.” Unlike the political declaration, the civil society “named names” and targeted shame and blame on particular countries. They commented:

The United States was particularly damaging to the prospects for a strong declaration. Throughout the negotiations they moved time and again to weaken language on HIV prevention, low-cost drugs and trade agreements and to eliminate commitments on targets for funding and treatment. “It’s death by diplomacy,” said Eric Sawyer, veteran activist and 25-year survivor of HIV/AIDS. “Hour after hour, my government fought for its own selfish interests rather than for the lives of millions dying needlessly around the globe”

There has however been a strong recognition in the declaration of the alarming feminization of the pandemic. Commitments were made to ensure that women can exercise their right to have control over their sexuality and to the goal of achieving universal access to reproductive health by 2015.

This progress was undermined however by regressive governments. “Syria, Egypt, Yemen, Iraq, Pakistan and Gabon blocked efforts to recognize and act to empower girls to protect themselves from HIV infection” said Pinar Ilkcaracan, President of Women for Women’s Human Rights. “Their failure to commit to ensuring access to comprehensive sexuality education for young people, and promote and protect sexual rights will undermine the response to the HIV pandemic.”

This was compounded by the declaration failing to acknowledge that some of the today’s fastest growing HIV epidemics are happening among injecting and other drug users, sex workers and men who have sex with men, despite strong support from the Rio Group of countries. For

example, governments have ignored the needs of injecting drug users by not stating the need for substitution drug treatment, putting them at further risk. “Failing to fully address the needs of these groups, and particularly to counter stigma and discrimination by decriminalizing drug use and sexual behaviors, will render them more invisible and ultimately lead to even higher rates of HIV/AIDS” said Raminta Stuikyte of the Central and Eastern European Harm Reduction Network.

See UNGASS in SHARP Focus Issue 4, 2 June 2006 for the full civil society press statement.

2. Map of the UNGASS Review 2006 Political Declaration

The “mapping” provided below is schematic and does not attempt to literally “map” the entire political declaration. Rather, it attempts to highlight some of the key paragraphs that address issues directly connected to sexual health and rights. Note also that the categories are overlapping rather than mutually exclusive.

Issue/group	Paragraph number
Gender (in)equality	<ul style="list-style-type: none"> ▪ paragraph 7 - recognize that gender inequalities and violence against women increase their vulnerability to HIV/AIDS ▪ paragraph 15 promote gender equality and empowerment of women ▪ paragraph 30 – eliminate gender inequalities, gender-based abuse and violence, and to increase the capacities of women and adolescent girls to protect themselves from the risk of HIV infection; reiterate the importance of the role of men and boys in achieving gender equality ▪ paragraph 45 - intensify investment in and efforts towards the research and development of new, safe and affordable HIV/AIDS-related medicines, such as female-controlled methods and microbicides
Human rights	<ul style="list-style-type: none"> ▪ paragraph 11 – reaffirm that the full realization of all human rights and fundamental freedoms for all is an essential element in the global response to the HIV/AIDS pandemic, including in the areas of prevention, treatment, care and support, and recognize that addressing stigma and discrimination is also a critical element in combating the global HIV/AIDS pandemic ▪ paragraph 12 – access to medication in the context of pandemics such as HIV/AIDS is one of the fundamental elements to achieve progressively the full realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health ▪ paragraph 15 – to mount a comprehensive response, we must overcome any legal, regulatory, trade and other barriers that block access to prevention, treatment, care

	<p>and support, commit adequate resources; promote and protect all human rights and fundamental freedoms for all</p> <ul style="list-style-type: none"> ▪ paragraph 25 – promote at the international, regional, national and local levels access to HIV/AIDS education, information, voluntary counseling and testing and related services, with full protection of confidentiality and informed consent, and to promote social and legal environment that is supportive of and safe for voluntary disclosure of HIV status ▪ paragraph 29 – intensify efforts to enact, strengthen or enforce, as appropriate, legislation, regulations and other measures to eliminate all forms of discrimination against and to ensure the full enjoyment of all human rights and fundamental freedoms by people living with HIV and members of vulnerable groups, in particular to ensure their access to, inter alia, education, inheritance, employment, health care, social and health services, prevention, support and treatment, information and legal protection, while respecting their privacy and confidentiality ▪ paragraph 30 – ensure that women can exercise their right to have control over and decide freely and responsibly on matters related to their sexuality to increase their ability to protect themselves from HIV infection, including their sexual and reproductive health, free of coercion, discrimination and violence, and take all necessary measures to create an enabling environment for the empowerment of women ▪ paragraph 31 – strengthen legal, policy, administrative and other measures for the promotion and protection of women’s full enjoyment of all human rights ▪ paragraph 43 – reaffirm that the World Trade Organization’s Agreement on Trade-Related Aspects of Intellectual Property Rights does not and should not prevent members from taking measures now and in the future to protect public health ▪ paragraph 51 – ensure accountability and transparency at all levels through participatory review of HIV/AIDS responses
Sexual health, sexuality	<ul style="list-style-type: none"> ▪ paragraph 18 – reference to the International Conference on Population and Development ▪ paragraph 21 – policy and program linkages, including with sexual and reproductive health and national development plans and strategies ▪ paragraph 22 – prevention as the mainstay of responses, included expanded access to male and female condoms and sterile injecting equipment <p>(Note: this paragraph also contains problematic language about the provision of information, education and communication that is “respectful of cultures,” and educating risk-taking behaviors and encouraging responsible sexual behavior, including abstinence</p>

	<p>and fidelity)</p> <ul style="list-style-type: none"> ▪ paragraph 30 - eliminate gender inequalities including through the provision of health care and services including sexual and reproductive health ... and ensure that women can exercise their right to have control over and decide freely and responsibly on matters related to their sexuality to increase their ability to protect themselves from HIV infection, including their sexual and reproductive health, free of coercion, discrimination and violence <p>(Note: the phrase “health care and services” in the context of sexual and reproductive health is generally objected to by the US and the Holy See as suggesting abortion)</p> <ul style="list-style-type: none"> ▪ paragraph 34 - comprehensive HIV/ AIDS programming that is integrated with sexual and reproductive health
Stigma and discrimination	<ul style="list-style-type: none"> ▪ paragraph 11 - recognize that addressing stigma and discrimination is also a critical element in combating the global HIV/ AIDS pandemic ▪ paragraph 29 - eliminate all forms of discrimination, ensure the full enjoyment of all human rights and fundamental freedoms by...vulnerable groups... and develop strategies to combat stigma and social exclusion connected with the epidemic ▪ paragraph 31 - strengthen legal, policy, administrative and other measures for the promotion and protection of women’s full enjoyment of all human rights and reduction of their vulnerability to HIV/ AIDS through the elimination of all forms of discrimination
Vulnerable groups	<ul style="list-style-type: none"> ▪ paragraph 14 - deliver an intensified, much more urgent and comprehensive response in partnership with the United Nations system, intergovernmental organizations, people living with HIV and vulnerable groups, medical, scientific and education institutions, non-governmental organizations, the business sector including generic and research-based pharmaceutical companies, trade unions, the media, parliamentarians, foundations, community organizations, faith-based organization and traditional leaders ▪ paragraph 16 - without renewed political will, strong leadership and sustained commitment and concerted efforts from all stakeholders at all levels, including people living with HIV/ civil society and vulnerable groups, and with out increased resources, the world will not succeed in bringing about the end of the pandemic ▪ paragraph 20 - commit to pursue all necessary efforts to scale up nationally driven, sustainable and comprehensive responses to achieve broad multisectoral coverage for prevention, treatment, care and support, with full and active participation of people living with HIV, vulnerable groups, most affected communities, civil society and the private sector, toward the goal of

	<p>universal access to comprehensive prevention programmes, treatment, care and support by 2010</p> <ul style="list-style-type: none"> ▪ paragraph 29 - ensure the full enjoyment of all human rights and fundamental freedoms by people living with HIV and members of vulnerable groups
<p>Women's human rights (including addressing violence against women and girls)</p>	<ul style="list-style-type: none"> ▪ paragraph 7 - concern about the overall expansion and feminization of the pandemic and that women now present half of all people living with HIV, including nearly 60 percent in Africa, and... recognize that gender inequalities and all forms of violence against women and girls increase their vulnerability to HIV/AIDS ▪ paragraph 15 - promote gender equality and empowerment of women; promote and protect the rights of the girl child in order to reduce their vulnerability to HIV/AIDS ▪ paragraph 27 - ensure that pregnant women have access to antenatal care and access to effective treatment to women living with HIV; effective interventions for women living with HIV ▪ paragraph 30 - pledge to eliminate gender inequalities, gender-based abuse and violence, and to increase capacities of women and adolescent girls to protect themselves from the risk of HIV infection... and take all necessary measures to create an enabling environment for the empowerment of women and to strengthen their economic independence ▪ paragraph 31 - strengthening legal, policy, administrative and other measures for the promotion and protection of women's full enjoyment of all human rights and reduction of their vulnerability to HIV/AIDS through the elimination of all forms of discrimination, as well as all types of sexual exploitation of women, girls and boys, including for commercial reasons, and all forms of violence against women and girls, including harmful traditional and customary practices, abuse, rape and other forms of sexual violence, battering and trafficking in women and girls ▪ paragraph 32 - provide support and rehabilitation to [children affected by and living with HIV] and their families, women and the elderly, particularly in their role as caregivers <p>(Note: the linking of women with children and the elderly as groups in need of support is a problematic formulation that can be seen to position women as inherently in need of protection rather than as agents requiring the promotion and protection of their human rights)</p>

Related Issues

Universal access – see paragraphs 18 (universal access to reproductive health by 2015 as in ICPD); paragraph 20 (universal access to comprehensive prevention programmes, treatment, care and support by 2010); paragraph 49 (commit to set in 2006, through

inclusive transparent processes, ambitious national targets, including interim targets for 2008 in accordance with core indicators...that reflect the commitment of this Declaration and the urgent need to scale up significantly toward the goal of universal access....)

Young people – paragraph 26 (through comprehensive, evidence-based prevention strategies, responsible sexual behavior, including the use of condoms ,evidence-0 and skills-0based, youth specific HIV education, mass media interventions and the provision of youth friendly health services),

4. Wrap-up from Kaiser Daily HIV/ AIDS Report, 5 June 2006

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Kaiser Daily HIV/ AIDS Report provided a succinct summary of the main outcomes of the UNGASS review, as well as some of the key concerns. In addition, they offered web casts of many key UNGASS sessions from 31 May – 2 June, 2006.

At UNGASS, Nations Adopt Final Declaration

U.N. member nations attending the U.N. General Assembly Special Session on HIV/AIDS in New York City on Friday after "difficult" negotiations reached a compromise on a final declaration to address the HIV/AIDS pandemic, the Washington Post reports (Brown, Washington Post, 6/3). The three-day meeting aimed to update a 2001 declaration that provided the framework for a worldwide campaign to fight HIV/AIDS. The 2001 declaration laid out several goals, including the specific amount of money that should be spent on HIV/AIDS in developing countries in 2005, the percentage of pregnant women who should be receiving drugs to prevent mother-to-child transmission of HIV and the percentage of HIV-positive people with advanced stages of the disease who should be receiving antiretroviral drugs. Most of the goals in the 2001 declaration were not met, but a goal to spend \$8.3 billion on HIV/AIDS in developing nations was reached. The declaration is not a binding document (Kaiser Daily HIV/ AIDS Report, 6/2). The new declaration is a "political blueprint, not a plan of action," on how to combat the pandemic, according to the New York Times.

Declaration Text

According to the final document, countries should use scientifically documented prevention strategies, including access to condoms; make clean needles accessible to injection drug users; and move forward in their efforts to provide universal access to HIV prevention programs, antiretroviral drugs and medical care, the Times reports (Altman/Rosenthal, New York Times, 6/3). The declaration acknowledges the importance of "harm-reduction efforts related to drug use" -- in reference to needle-exchange programs -- but does not include reference to "substitution therapies," such as methadone, which many groups had urged for opiate addiction, according to the Post. The declaration also makes reference to

"male and female condoms" as a prevention method (Washington Post, 6/3). Although rights for girls and women were subjects of dispute during the discussions, the 2006 declaration "notably contain[s] fresh" language to empower women in regard to their sexual and reproductive health, "free of coercion, discrimination and violence," AFP/ChannelNews Asia.com reports (AFP/ChannelNews Asia.com, 6/2). The declaration acknowledges the "feminization" of the pandemic and also recognizes the importance of increasing HIV/AIDS awareness among young people and the need for drugs formulated for children (Washington Post, 6/3). The declaration also says that annual funding for HIV/AIDS must increase from \$8 billion to between \$20 billion and \$23 billion by 2010 and calls for "ambitious national targets" to be set for 2006, including interim targets for 2008, Xhinueanet reports (Xhinueanet, 6/3). The document does not commit donors or recipient countries to provide that amount (Washington Post, 6/3). According to UNAIDS, \$8.9 billion is expected to be available in 2006 to fight HIV/AIDS in developing countries, short of the \$14.9 billion that is needed. The agency also projects that the need for resources will rise to \$22.1 billion by 2008, including \$11.4 billion for prevention (Kaiser Daily HIV/AIDS Report, 6/1). The document does not provide clinical targets regarding how many HIV-positive people should be treated, the Post reports. The eight-page document is a compromise between the U.S., which opposed "numerical treatment targets"; Islamic countries, which did not want the term "vulnerable populations" defined in the text; and many nongovernmental and HIV/AIDS advocacy organizations that urged more reproductive rights for women to help them protect themselves against HIV/AIDS, the Post reports (Washington Post, 6/3).

Reaction to Declaration

Mark Dybul, acting U.S. Global AIDS Coordinator, said he had not seen any weak points in the "fine declaration." International Women's Health Coalition President Adrienne Germain said the declaration could be used "to make significant progress in going forward" to curb the pandemic (New York Times, 6/3). However, the final declaration was "condemned as blinkered and ineffective" by some NGOs and HIV/AIDS advocates attending the meeting, AFP/News Asia.com reports (AFP/ChannelNews Asia.com, 6/2). Stephen Lewis, U.N. special envoy for HIV/AIDS in Africa, said, "The absence of the financial targets distresses me," adding, "What I run into everywhere in Africa is a very great anxiety on the part of governments about whether they're able to sustain the financing. And they just don't feel that they have a reliable commitment" (McCarthy, Globe and Mail, 6/2). Aditi Sharma, HIV/AIDS campaign and policy coordinator for ActionAid International, said, "It is incomprehensible how negotiators could come up with such a weak declaration when we needed urgent action to stop 8,500 people dying and 13,500 people from becoming infected every day" (AFP/ChannelNews Asia.com, 6/2). "Once more we are disappointed at the failure to demonstrate real political leadership in the fight against the pandemic,"

the Rev. Njongonkulu Ndungane, the Anglican Archbishop of Capetown, South Africa, said, adding, "Even at this late stage, we call on the world's political leaders to rise up and meet the challenges that the pandemic presents and to set ambitious targets at a national level to guarantee universal access to treatment, care, support and prevention" (Center for Health and Gender Equity release, 6/2). "I know that none of you got all that you wanted in this declaration," U.N. General Assembly President Jan Eliasson said in closing the session, adding that the "draft got stronger -- not weaker" as a result of the advocacy groups' contributions (Leopold, Reuters UK, 6/3). UNAIDS Executive Director Peter Piot encouraged U.N. member nations to adopt the final draft of the declaration, saying it would "take us to the next stage in the fight against AIDS," adding, "Even though we may have differences of tactics, as was clear this week, we are all a critical piece of the same strategy" (AFP/ChannelNews Asia.com, 6/2). Piot said that the final version was a "major advance" from previous drafts earlier in the week (New York Times, 6/3).

U.N. Secretary-General Criticizes Some Parts of Declaration, Political Leadership

U.N. Secretary-General Kofi Annan on Friday at the close of the special session "delivered a gloomy assessment" of global efforts to curb the spread of HIV/AIDS, the Times reports (New York Times, 6/3). "The epidemic continues to outpace us," Annan said, adding, "Last year, globally, there were more new infections than ever before, and more people died than ever before" (Wadhams, AP/Houston Chronicle, 6/2). He added that if countries do not "step up the fight drastically," the world will not be able to "reverse the tide" against the pandemic (International Herald Tribune, 6/3). Annan also criticized nations for not addressing high-risk groups -- such as IDUs, commercial sex workers and men who have sex with men -- more specifically in the declaration. Annan said, "You cannot deal with a problem without confronting the issue of the most vulnerable who need assistance most. It's counterproductive" (BBC News, 6/3).

5. Statement by the Progressive Youth Caucus

The Watchdog UNGASS HIV/AIDS, Friday 2 June 2006

A critical youth analysis of the political declaration

The AIDS UNGASS is reaching its end, and a new political declaration is about to be adopted in the General Assembly. As many of us already know, the declaration fails to commit to further action that would be necessary to combat HIV/AIDS. There is good text related to youth in the declaration, such as mentioning of condoms, youth friendly health services, evidence based prevention strategies and women's full enjoyment of human rights. These are all core strategies in fighting HIV/AIDS, and we encourage all to take them home, and advocate for a youth perspective in policy and implementation.

But, the absence of specific language such as comprehensive sexuality education, empowerment of girls, discriminated populations, sexual and reproductive rights and marital rape as one of the forms of sexual violence, leaves the declaration weak and ambiguous. These missing languages have profound impact in the lives of young people and their chances to protect themselves from HIV/AIDS. Due to the lack of text on comprehensive sexuality education, the declaration is missing one of the most important ways for youth to receive the information and capacities needed to make informed choices. Further, a much stronger language is needed on gender. The declaration we sit with now simplifies gender issues and fails to stress the importance of empowerment of young women and girls, and hence leaves out a key component of prevention in an age of feminization of HIV/AIDS. Worst, conservative language such as abstinence and fidelity, ethics and cultural values have found their way to the document. These so called ethics and values have the sole purpose of stripping young people of agency and empowerment, by controlling their sexuality. To believe that doing this will prevent HIV/AIDS is, plainly speaking, depressing.

We also believe that the term "vulnerable groups" should be changed to "discriminated populations", because while some populations in society are bearing a heavier burden of the HIV/AIDS pandemic, it does not mean that they are vulnerable in themselves as human beings. The high infection rates among young people (particularly young women), men who have sex with men, sex workers and injecting drug users, should be blamed on the lack of acceptance, support, and respect for their experiences and identities that societies in this world still reproduce. The problem is not the people, it's the discriminatory systems they are forced to either exist within or live outside of. Coming to New York this week has been a disappointment for many of us. If we mean serious business with combating HIV/AIDS, we need stronger political leadership from member states at this level. Yet, the things that have disappointed us during this last week should not be brought up as a failure in the future, but rather as an inspiration of what happens when everyone are not committing to an issue as serious and critical for this world as HIV/AIDS

We solemnly swear to keep the fight going. (Progressive Youth Caucus, The Watchdog UNGASS HIV/AIDS, 2 June 2006.)