The United Nations High Level Meeting (HLM) on HIV/AIDS, which will take place on 8-10 June 2021, is an important opportunity for the global HIV response to reflect on the progress made thus far and reevaluate targets for HIV prevention, treatment and care in the current context.

The Civil Society Engagement Mechanism for UHC2030 (CSEM) urges the new political declaration on HIV/AIDS to be ambitious and comprehensive, ensuring — above all — a commitment to health for all.

Access to HIV prevention, treatment and care services will remain inadequate as long as Universal Health Coverage (UHC) is not achieved. The global HIV response and the UHC agenda are interlinked; the success of both hinges on building strong health systems that deliver quality, people-centered care. As stakeholders gather to chart the future of the fight against HIV in the backdrop of a pandemic that has drastically impacted every aspect of the health system, we echo calls for global solidarity and encourage leaders to unite for effective strategies that promote health as a public good.

We call on Members States to:

* **Leave no one behind**
  - Prioritize equity considerations in HIV policies and programming, including the compounding effects of poverty, gender inequalities, discrimination based on ethnicity, disability, sexual orientation and gender identity, and migratory status on people living with and at risk of HIV
  - Ensure tracking of HIV targets with disaggregated data that measure reaching all populations with quality, affordable and stigma-free services

* **Increase public financing for health**
  - Remove user fees for HIV services and build implementation plans for eliminating all out-of-pocket spending on health
  - Increase public financing for health, including for the full range of HIV services, through progressive taxation or other mandatory and fair contributions for resource pooling
  - Improve transparency and accountability in budgeting and expenditure tracking

* **Engage civil society and communities**
  - Invest in civil society and community-led responses that tailor approaches to the needs of affected communities. During the COVID-19 pandemic, civil society and community-based organizations supported communities, including people living with HIV, to access lifesaving medicines and supplies with innovative approaches; to scale up these responses and maximize
their impact, provide civil society with adequate resources and protect civic space, especially for those led by and working with key populations.

- Showcase the HIV response’s leadership in inclusive governance by highlighting the role of civil society in improving access to HIV services and reducing HIV-related inequalities, tracking community participation in decision-making, and promoting best practices that can support improving social participation in broader health system governance.
- Create new or strengthened alliances with civil society and community-led organizations across the health and social protection space to better consider the broader health needs of people living with HIV, address the social and structural determinants of health outcomes, and build support to strengthen health systems for UHC.

**Invest in health workers**

- Increase investments in community health workers, who are essential in service delivery for HIV prevention and treatment as well as delivering all quality, people-centered health services. Community health workers need proper remuneration for their work to ensure they can continue to support the provision of inclusive, holistic and equitable health services, especially to those who are most marginalized.

**Prioritize integration at all levels**

- Build strong primary health care systems that can deliver quality, people-centered care; integrated service packages in primary health care settings that are tailored to communities will increase the impact of HIV programs and ensure their sustainability.
- Establish and strengthen partnerships between the HIV response and other movements for health and social protection, including those focused on UHC, TB, sexual and reproductive health and rights, education and climate change among others.

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**This document is based on consultative messages developed for the UN HLM on UHC and the COVID-19 context. It is not comprehensive of all civil society’s concerns and recommendations for the global HIV response. The CSEM supports the key asks of other civil society and community stakeholders that promote equitable service delivery and build toward ending AIDS for all.**

The Civil Society Engagement Mechanism for UHC2030 (CSEM) is the civil society constituent of UHC2030, the global movement to build stronger health systems for universal health coverage. The CSEM raises civil society voices in UHC2030 to ensure that UHC policies are inclusive and equitable, and that systematic attention is given to the most marginalized and vulnerable populations so that no one is left behind.

To find more information and join the CSEM, visit: [www.csemonline.net](http://www.csemonline.net)  
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